FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

						Offic	ce Use Only
1.	NAME OF COMMITTEE (in full)	USE FEC MAIL OR TYPE OR P		Example:If typing, over the lines	type		
LG	Graves for Congress						
ΑD	DRESS (number and stre	et) 2345 Grand	I, Suite 2400				
	Check if different than previously reported. (ACC)	Kansas City	, , , , , , , , , , , , , , , , , , ,			MO L	64,108
2.	FEC IDENTIFICATION	NUMBER 🔻	CITY	A	S	TATE A	ZIP CODE A
	C00359034		3. IS THIS REPOR	T NEV	V OR	AMENDED (A)	STATE V DISTRICT
4.	TYPE OF REPORT (a) Quarterly Reports:	(Choose One)	(b) 12-Day	PRE-Election Repo		General (12G)	Runoff (12R)
		erly Report (Q1) erly Report (Q2)		Convention (Special (12S)	
	October 15 Qu	uarterly Report (Q3)	Election	on	L.J L		in the State of
	January 31 Ye	ear-End Report (YE)	(c) 30-Day	POST-Election Rep	port for the:		
				General (300	3)	Runoff (30R)	Special (30S)
	Termination R	eport (TER)	Election	on			in the State of
5.	Covering Period	0 1	2006	through	03	3 1	2006
	ertify that I have examined be or Print Name of Treasu		best of my knowle aul Bradshaw	edge and belief it is	true, correct ar	nd complete.	
Sig	nature of Treasurer Ele	ectronically Filed by	Jean Paul Bra	dshaw	Dat	te 0 9	22 2006
NO	OTE : Submission of false,	erroneous, or incomp	lete information m	ay subject the pers	on signing this	Report to the pena	alties of 2 U.S.C 437g.
	Office Use Only						FEC FORM 3 (Revised 02/2003)

Image# 26960405507

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003) Page 2 Write or Type Committee Name **Graves for Congress** ° D 03 From: 0 1 0.1 2006 3 1 2006 Report Covering the Period: To: **COLUMN B COLUMN A This Period Election Cycle-to-Date** Net Contributions (other than loans) (a) Total Contributions 70574.50 662544.50 (other than loans) (from Line 11(e))...... (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d))..... (c) Net Contributions (other than loans) 70574.50 662544.50 (subtract Line 6(b) from Line 6(a))....... 7. Net Operating Expenditures (a) Total Operating Expenditures 118272.23 501929.74 (from Line 17)..... (b) Total Offsets to Operating 46.10 133116.53 Expenditures (from Line 14)..... (c) Net Operating Expenditures 118226.13 368813.21 (subtract Line 7(b) from Line 7(a))....... Cash on Hand at Close of 358534.70 Reporting Period (from Line 27)..... 9. Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D)..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 2644.65 Schedule C and/or Schedule D)..... For further information contact:

> Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100 FEC Form 3 (Revised 02/2003)

DETAILED SUMMARY PAGE

of Receipts

Page 3

Write or Type Committee Name **Graves for Congress** ° D 0 1 2006 03 2006 From: 0 1 Report Covering the Period: To: 3 1 **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 48675.00 303930.00 (i) Itemized (use Schedule A)..... 11399.50 36776.50 (ii) Unitemized..... (iii) TOTAL of contributions 60074.50 340706.50 from individuals..... 0.00 963.00 (b) Political Party Committees..... (c) Other Political Committees 10500.00 320875.00 (such as PACS)..... 0.00 0.00 (d) The Candidate..... (e) TOTAL CONTRIBUTIONS (other than loans) 70574.50 662544.50 (add Lines 11(a)(iii), (b), (c), and (d)) 12. TRANSFERS FROM OTHER 0.00 0.00 AUTHORIZED COMMITTEES..... 13. LOANS (a) Made or Guaranteed by the 0.00 0.00 Candidate..... 0.00 0.00 (b) All Other Loans..... (c) TOTAL LOANS 0.00 0.00 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** 46.10 133116.53 (Refunds, Rebates, etc.).... 15. OTHER RECEIPTS 1993.70 2109.66 (Dividends, Interest, etc.)..... 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...... 72614.30 797770.69

FEC Form 3 (Revised 02/2003)

DETAILED SUMMARY PAGE

of Disbursements

Page 4

	II. DISBURSEMENTS —	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. (OPERATING EXPENDITURES	118272.23	501929.74
	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
	LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
((b) Of all Other Loans	0.00	0.00
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00
-	REFUNDS OF CONTRIBUTIONS TO:		
((a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
((c) Other Political Committees (such as PACs)	0.00	0.00
((d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
21. (OTHER DISBURSEMENTS	1000.00	60315.00
	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	119272.23	562244.74
	III. CASH SUMMA	\RY	
23. (CASH ON HAND AT BEGINNING OF REPORTING	PERIOD	405192.63
24. ⁻	TOTAL RECEIPTS THIS PERIOD (from Line 16, pag	e3)	72614.30
25. \$	SUBTOTAL (add Line 23 and Line 24)		477806.93
26. ⁻	TOTAL DISBURSEMENTS THIS PERIOD (from Line	2 22)	119272.23
27. (CASH ON HAND AT CLOSE OF REPORTING PER	IOD	358534.70

SCHEDULE A (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 5/88
TEMIZED RECEIPTS	or each category of the	(check only one)
	Detailed Summary Page	X 11a 11b 11c 11d 11d 12 13a 13b 14 15
Any information copied from such Reports and State	ments may not be sold or used by any person	for the purpose of soliciting contributions
or for commercial purposes, other than using the nar NAME OF COMMITTEE (In Full)	ne and address of any political committee to s	Solicit Contributions from Such Committee.
Graves for Congress		
GIAVES IOI CONGRESS		
Full Name (Last, First, Middle Initial) A. Lowell C. Kruse		Date of Receipt
Mailing Address 7300 SE 75th Rd.		03 09 2006
City	State Zip Code	
Saint Joseph	MO 64507	Transaction ID: 60802.C6938 Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	1000.00
Name of Employer Heartland Health	Occupation	Receipt
	Hospital Admin.	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Election Cycle-to-Date ▼	Spending (2 0.3.0. 441d(I)/441d-1)
X Primary General Other (specify)	1000.00	
	0 0 0 0 0 0 0 0 0	
Full Name (Last, First, Middle Initial) 3. William P. Jackson		Date of Receipt
Mailing Address P. O. Box 38		M M / D D / Y Y Y Y
		03 30 2006
City	State Zip Code	Transaction ID: 60802.C7137
Brunswick	MO 65236	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	Receipt
Agricanticas of Bruniswick	General Manager	Limit Increased Due to Opponent's
	Election Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
X Primary General	200.00	
Other (specify)	200.00	
Full Name (Last, First, Middle Initial)		Data of Bassist
Mary M. Hackett Mailing Address 902 Park		Date of Receipt
		03 30 2006
City	State Zip Code	Transaction ID: 60802.C7114
Tarkio	MO 64491	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	c	250.00
<u> </u>	Occupation	Receipt
Retired	Occupation Banking-Investments	Limit Increased Due to Opponent's
	Election Cycle-to-Date	Spending (2 U.S.C. 441a(i)/441a-1)
X Primary General		
Other (specify)	250.00	
		1250.00
SUBTOTAL of Receipts This Page (optional)	<u> </u>	1350.00
TOTAL This Period (last page this line number only	·)	

S	CHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 6 / 88
	EMIZED RECEIPTS		or each category of the	(check only one)
• • • • • • • • • • • • • • • • • • • •	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 11d
				12 13a 13b 14 15
Ar or	ny information copied from such Reports and Stor commercial purposes, other than using the	Statements may e name and add	not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	Graves for Congress			
A.	Full Name (Last, First, Middle Initial) Charlee M. Garst			Date of Receipt
	Mailing Address 610 East Cass Street			03 / 29 / 2006
	City	State	Zip Code	Transaction ID: 60802.C7081
	Rock Port	MO	64482	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Self Employed	Occupation	<u> </u>	Receipt
	Self Employed	Farmer		Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	tycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General	1	400.00	7
	Other (specify) ▼	0 0	400.00	
	Full Name (Last, First, Middle Initial)			- · · · - · · ·
В.	R. Dan Boulware			Date of Receipt
	Mailing Address 27 Court Lane	03 / 09 / 2006		
	City	State	Zip Code	Transaction ID: 60802.C6932
	Saint Joseph	<u>MO</u>	64506	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupation	า	Receipt
	Watkins, Boulware	Attorney		Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	tycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General	' '	1000.00	7
	Other (specify)	0 0	0 0 0 0 0 0 0	
C.	Full Name (Last, First, Middle Initial) David Bradley			Date of Receipt
	Mailing Address 2916 Frederick Ave			03 / 09 / 7 7 9 9
	City	State	Zip Code	Transaction ID: 60802.C6971
	Saint Joseph	MO	64506	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer News Press Gazette	Occupation	า	Receipt
	News Press Gazette	owner		Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		1500.00	7
	Other (specify) ▼		1300.00	
s	UBTOTAL of Receipts This Page (optional) .	1		1750.00
ιT	OTAL This Period (last page this line number	r only)		

S	CHEDULE A (FEC Form 3)		Llac concrete achadula(a)	FOR LINE NUMBER: PAGE 7 / 88
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
•••	EIVIIZED RECEIP I 3		Detailed Summary Page	X 11a 11b 11c 11d
				12 13a 13b 14 15
Ar or	ny information copied from such Reports and Strong for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	Graves for Congress			
A.	Full Name (Last, First, Middle Initial) Donna M. Turk			Date of Receipt
	Mailing Address 2912 Frederick Ave.			01 31 2006
	City	State	Zip Code	Transaction ID: 60802.C6902
	Saint Joseph	MO	64506-2904	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1612.57
	Name of Employer Little Ceasers Pizza Aaro-	Occupation	 1	In-Kind
	Little Ceaser's Pizza Aaro- ns Re	owner		Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		1654.57	Food for Event
	Other (specify)	0 0	1034.37	
В.	Full Name (Last, First, Middle Initial) Donna M. Turk			Date of Receipt
	Mailing Address 2912 Frederick Ave.	01 31 2006		
	City	State	Zip Code	Transaction ID: 60802.C6895
	Saint Joseph	MO	64506-2904	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		219.43 Receipt
	Name of Employer Little Ceasers Pizza Aaro-	Occupation	1	· ·
	ns Re	owner		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006 X Primary General	Election C	ycle-to-Date ▼	Spending (2 everes 111a(r), 111a r)
	Other (specify) ▼		1874.00	
<u>с.</u>	Full Name (Last, First, Middle Initial) Donna M. Turk			Date of Receipt
	Mailing Address 2912 Frederick Ave.			01 31 2006
	City	State	Zip Code	Transaction ID: 60802.C6904
	Saint Joseph	MO	64506-2904	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Little Ceasers Pizza Aaro-	Occupation	1	In-Kind
	Little Ceaser's Pizza Aaro- ns Re	owner		Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼	0 0	1974.00	Refreshments for Event
s	UBTOTAL of Receipts This Page (optional) .	1		1932.00
	OTAL This Period (last page this line number			

S	CHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 8 / 88
ITEMIZED RECEIPTS			or each category of the	(check only one)
•••	LIMIZED RECEIF 13		Detailed Summary Page	X 11a 11b 11c 11d
_				12 13a 13b 14 15
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements may name and add	/ not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
<u></u>	NAME OF COMMITTEE (In Full)		are or any point our committee to	
$ \rangle$	Graves for Congress			
	Craves for Congress			
	Full Name (Last, First, Middle Initial)			
A.	Donna M. Turk			Date of Receipt
	Mailing Address 2912 Frederick Ave.			M M / D D / Y Y Y Y
	City	Ctata	7in Code	01 31 2006
	City	State MO	Zip Code	Transaction ID: 60802.C6903
	Saint Joseph	IVIO	64506-2904	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		68.00
	rederai politicai committee.			In Kind
	Name of Employer Little Ceasers Pizza Aaro-	Occupation	n	In-Kind
	ns Re	owner		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006	Election C	Sycle-to-Date ▼	Spending (2 0.3.0. 441a(I)/441a-1)
	X Primary General	1	2042.00	Transportation for Event
	Other (specify)	0 0		
_	Full Name (Last, First, Middle Initial)			+
В.				Date of Receipt
	Mailing Address 14306 Riverview Drive			M M / D D / Y Y Y Y
				03 09 2006
	City	State	Zip Code	Transaction ID: 60802.C6933
	Savannah	MO	64485	Amount of Each Receipt this Period
	FEC ID number of contributing	C		500.00
	federal political committee.			33333
	Name of Employer Heartland Health	Occupation	n	Receipt
	Heartland Héalth	Hospital .	Administration	Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	Sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		500.00	
	Other (specify)		500.00	
C.	Full Name (Last, First, Middle Initial) Jimmie D. Carter			Date of Receipt
٠.	Mailing Address 3301 N. Belt Hwy.			M M / D D / Y Y Y Y
	3302 E. Devonshire			03 09 2006
	City	State	Zip Code	Transaction ID: 60802.C6978
	Saint Joseph	MO	64506	Amount of Each Receipt this Period
	FEC ID number of contributing			1000.00
	federal political committee.	C		1000.00
	Name of Employer	Occupation		Receipt
Camolaur, Inc.		President		Limit Increased Due to Opponent's
	Receipt For: 2006		Sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General	1 1		
	Other (specify)		2000.00	
_				
				1568.00
S	UBTOTAL of Receipts This Page (optional)		······	100.00
T	OTAL This Period (last page this line number	only)		

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 88 (check only one) X 11a 11b 11c 11d 11d 12 13a 13b 14 15
An or	y information copied from such Reports and S for commercial purposes, other than using the	tatements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Graves for Congress			
Α.	Full Name (Last, First, Middle Initial) Stephen McBee Mailing Address 409 N. Wooden Avenu City Braymer FEC ID number of contributing federal political committee. Name of Employer Self Employed	State MO C Occupatio Farmer	Zip Code 64624	Date of Receipt M M M
	Receipt For: 2006 X Primary General Other (specify) ▼		Cycle-to-Date ▼ 750.00	Spending (2 U.S.C. 441a(i)/441a-1)
3.	Full Name (Last, First, Middle Initial) Thomas L. Brown Mailing Address 1306 NW 47th Street City	State	Zip Code	Date of Receipt M M
	Kansas City	MO	64116	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		450.00 Receipt
	Name of Employer Hays Group LLC Receipt For: 2006 Primary X General Other (specify) ▼	Occupatio Insuranc Election C		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
`	Full Name (Last, First, Middle Initial)			Date of Descipt
٠.	Thomas L. Brown Mailing Address 1306 NW 47th Street			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
	City Kansas City	State MO	Zip Code	Transaction ID: 60802.C6875
	FEC ID number of contributing federal political committee.	C	64116	Amount of Each Receipt this Period 50.00
	Name of Employer Hays Group LLC	Occupatio Insuranc		Receipt Limit Increased Due to Opponent's
	Receipt For: 2006 X Primary General Other (specify)	Election C	Cycle-to-Date ▼ 2550.00	Spending (2 U.S.C. 441a(i)/441a-1)
S	UBTOTAL of Receipts This Page (optional)			1000.00
T	OTAL This Period (last page this line number	only)	<u> </u>	

SCHEDULE A (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 10 / 88
TEMIZED RECEIPTS	or each category of the	(check only one) X 11a 11b 11c 11d
	Detailed Summary Page	X 11a 11b 11c 11d 11d 12 13a 13b 14 15
Any information copied from such Reports and State or for commercial purposes, other than using the na	ements may not be sold or used by any person me and address of any political committee to	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		
Graves for Congress		_
Full Name (Last, First, Middle Initial) John Elliott		Date of Receipt
Mailing Address P. O. Box 328		01 2006
City Smithville	State Zip Code MO 64089	Transaction ID: 60802.C6881 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Inside Solutions	Occupation Marketing	Receipt Limit Increased Due to Opponent's
Receipt For: 2006 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00	Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) Michael W. Wilson		Date of Receipt
Mailing Address 1018 NW Clinton County	03 / 09 / 2006	
City Smithville	State Zip Code MO 64089-8215	Transaction ID: 60802.C7039 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Secure Pharmacy Plus	Occupation Pharmacist	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 1100.00	Spending (2 0.5.0. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) 3. Barry E. Kreek		Date of Receipt
Mailing Address P. O. Box 468		03 09 2006
City	State Zip Code	Transaction ID: 60802.C6913
Oregon	MO 64473	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00 Receipt
Name of Employer Citizens Bank	Occupation Banker	Limit Increased Due to Opponent's
Receipt For: 2006	Election Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
X Primary General Other (specify) ▼	200.00	
SUBTOTAL of Receipts This Page (optional)	·····	800.00
TOTAL This Period (last page this line number onl	y)	

S	CHEDULE A (FEC Form 3	1		FOR LINE NUMBER: PAGE 11 / 88			
ITEMIZED RECEIPTS		,	Use separate schedule(s) or each category of the	(check only one)			
П	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 11d			
				12 13a 13b 14 15			
Ar	y information copied from such Reports ar	nd Statements may	not be sold or used by any pers	on for the purpose of soliciting contributions			
or		the name and add	dress of any political committee t	o solicit contributions from such committee.			
	NAME OF COMMITTEE (In Full)						
	Graves for Congress						
_	Full Name (Last, First, Middle Initial)						
A.	Edward M. Stevens			Date of Receipt			
	Mailing Address 2104 Crest Terr			03 09 2006			
	City	State	Zip Code	Transaction ID: 60802.C7030			
	Saint Joseph	MO	64506	Amount of Each Receipt this Period			
	FEC ID number of contributing						
	federal political committee.	C		500.00			
	Name of Employer	Occupation	2	Receipt			
	Name of Employer Self Employed	Physcian		Limit Increased Due to Opponent's			
	Receipt For: 2006		sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)			
	X Primary General						
	Other (specify) ▼		500.00				
В.	Full Name (Last, First, Middle Initial)			Data of Daggint			
Ь.	Wes Condron Mailing Address 1300 SW Skyline D	rivo		Date of Receipt			
	Mailing Address 1300 SW Skyllile D	rive		03 31 2006			
	City	State	Zip Code	Transaction ID: 60802.C7186			
	Blue Springs	MO	64015	Amount of Each Receipt this Period			
	FEC ID number of contributing	C		1000.00			
	federal political committee.	C		1000.00			
	Name of Employer	Occupation	<u> </u>	Receipt			
	Bank of Blue Springs	Vice Pres	sident	Limit Increased Due to Opponent's			
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)			
	X Primary General		2000.00				
	Other (specify)		2000.00	_			
	Full Name (Last, First, Middle Initial)						
C.	Henry H. Bradley			Date of Receipt			
	Mailing Address P. O. Box 29			M M / D D / Y Y Y Y			
				03 09 2006			
	City	State	Zip Code	Transaction ID: 60802.C6972			
	Saint Joseph	MO	64502	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		1000.00			
				Receipt			
	Name of Employer News Press Gazette	Occupation		<u> </u>			
		Chairmai		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)			
	Receipt For: 2006 X Primary General	Election C	ycle-to-Date ▼				
	Other (specify)		1000.00				
				_			
		•					
s	UBTOTAL of Receipts This Page (optional	d)(l		2500.00			
T	TOTAL This Period (last page this line number only)						

S	CHEDULE A (FEC Form 3)		Use separate schedule(s)	Check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a
An or	y information copied from such Reports and Story commercial purposes, other than using the	atements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full) Graves for Congress			
Α.	Full Name (Last, First, Middle Initial) Robert E. Loch, Jr. Mailing Address 1208 Parkdale Rd.			Date of Receipt
	City	State	Zip Code	0 3 0 9 2 0 0 6 Transaction ID: 60802.C6916
	Maryville	MO	64468	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2100.00
	Name of Employer Loch Sand and Construction Co.	Occupation CEO		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006 X Primary General Other (specify) ▼	Election C	cycle-to-Date ▼ 2100.00	Speriality (2 0.3.0. 441a(1)/441a-1)
В.	Full Name (Last, First, Middle Initial) Robert E. Loch, Jr. Mailing Address 1208 Parkdale Rd.			Date of Receipt
	City	State	Zip Code	03 09 2006
	Maryville	MO	64468	Transaction ID: 60802.C6917 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1 1 1 1	2100.00
	Name of Employer Loch Sand and Construction Co. Receipt For: 2006	Occupation CEO Election C	n Sycle-to-Date ▼	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General Other (specify) ▼	0 0	4200.00	
C.	Full Name (Last, First, Middle Initial) John J. Houlehan, Jr.			Date of Receipt
	Mailing Address 6917 N.W. 76th Place			03 09 2006
	City	State	Zip Code	Transaction ID: 60802.C7004
	Kansas City	MO	64152-2279	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00 Receipt
	Name of Employer Retired	Occupation Retired	n	Limit Increased Due to Opponent's
	Receipt For: 2006		Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼	0 0	192.00	
S	UBTOTAL of Receipts This Page (optional)			4225.00
Н	OTAL This Period (last nage this line number)			

S	CHEDULE A (FEC Form 3)		Llas congreta cohodulo(a)	FOR LINE NUMBER: PAGE 13 / 88
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
• • • • • • • • • • • • • • • • • • • •	EWIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 11d
				12 13a 13b 14 15
Ar or	ny information copied from such Reports and S for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	Graves for Congress			
A.	Full Name (Last, First, Middle Initial) John J. Houlehan, Jr.			Date of Receipt
	Mailing Address 6917 N.W. 76th Place			03 / 29 / 2006
	City	State	Zip Code	Transaction ID: 60802.C7089
	Kansas City	MO	64152-2279	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer	Occupation	1	Receipt
	Retired	Retired		Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	tycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		217.00	7
	Other (specify) ▼	0 0	217.00	
В.	Full Name (Last, First, Middle Initial) Hal R. Sinclair			Date of Receipt
	Mailing Address 8609 N. Shannon Ave	03 / 09 / 4 9 9		
	City	State	Zip Code	Transaction ID: 60802.C7029
	Kansas City	MO	64153-1777	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		100.00
	Name of Employer Phoenix Scientific, Inc.	Occupation	า	Receipt
		Veternary		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006	Election C	sycle-to-Date ▼	Spending (2 0.3.0. 441a(i)/441a-1)
	X Primary General Other (specify) ▼	0 0	350.00	
<u> </u>	Full Name (Last, First, Middle Initial) Jewett M. Fulkerson	<u> </u>		Date of Receipt
	Mailing Address 73 Fulkerson Circle			03 / 09 / 12006
	City	State	Zip Code	Transaction ID: 60802.C6991
	Liberty	MO	64068	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer Retired	Occupation	1	Receipt
	Retired	Retired		Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼	0 0	175.00	
s	UBTOTAL of Receipts This Page (optional)	1		175.00
	OTAL This Period (last page this line number			

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 88 (check only one)		
Ar	ny information copied from such Reports and St for commercial purposes, other than using the	atements may	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full) Graves for Congress		71			
Α.	Full Name (Last, First, Middle Initial) Jewett M. Fulkerson			Date of Receipt		
	Mailing Address 73 Fulkerson Circle	State	Zip Code	03 30 2006		
	City Liberty	MO	64068	Transaction ID: 60802.C7112 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		100.00		
	Name of Employer Retired	Occupation Retired		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Receipt For: 2006 X Primary General Other (specify) ▼	Election C	cycle-to-Date ▼ 275.00	Speriority (2 0.3.0. 441a(1)/441a-1)		
В.	Full Name (Last, First, Middle Initial) LuAnn Gage			Date of Receipt		
	Mailing Address P.O.Box 55	State	Zip Code	03 29 2006		
	City Stanberry	MO	64489	Transaction ID: 60802.C7080 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		1000.00		
	Name of Employer Homemaker	Occupation Housewit	e e	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Receipt For: 2006 X Primary General Other (specify) ▼	Election C	cycle-to-Date ▼ 1000.00			
<u>С</u> .	Full Name (Last, First, Middle Initial) Lynn Mackle			Date of Receipt		
	Mailing Address 1230 West 57th Street			03 / 09 / 2006		
	City Kansas City	State MO	Zip Code 64113	Transaction ID: 60802.C6918 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		100.00		
	Name of Employer Mackwood, Inc.	Occupation	ents	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Receipt For: 2006 X Primary General Other (specify) ▼	Election C	cycle-to-Date ▼ 250.00			
s	UBTOTAL of Receipts This Page (optional)			1200.00		
Ţ	TOTAL This Period (last page this line number only)					

S	CHEDULE A (FEC Form 3)		Llas separata ashadula(a)	FOR LINE NUMBER: PAGE 15 / 88
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)
• • • • • • • • • • • • • • • • • • • •	EWIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 11d
				12 13a 13b 14 15
Ar or	ly information copied from such Reports and S for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	Graves for Congress			
A.	Full Name (Last, First, Middle Initial) Charlie Arnot			Date of Receipt
	Mailing Address 1500 NE 98th Street			03 / 09 / 2006
	City	State	Zip Code	Transaction ID: 60802.C7045
	Kansas City	MO	64155	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Premium Standard Farms	Occupation	<u> </u>	Receipt
	Premium Ståndard Farms	Vice Pres	sident Public Affairs	Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	tycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		2000.00	7
	Other (specify) ▼	0 0	2000.00	
В.	Full Name (Last, First, Middle Initial) Tom Broderick			Date of Receipt
	Mailing Address 6841 N. Highway 33			03 / 31 / 2006
	City	State	Zip Code	Transaction ID: 60802.C7184
	Plattsburg	MO	64477	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		200.00
	Name of Employer Self Employed	Occupation	า	Receipt
		Farmer		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 8.8.8. 44 ra(i)/44 ra 1)
	X Primary General Other (specify) ▼	0 0	492.00	
<u> </u>	Full Name (Last, First, Middle Initial) Karen M Graves	1		Date of Receipt
	Mailing Address 12518 Lakeland			03 09 2006
	City	State	Zip Code	Transaction ID: 60802.C6992
	Saint Joseph	MO	64506	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		200.00
	Name of Employer	Occupation	1	Receipt
	Mack VII Tránsportatiion, Inc	Attorney		Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		200.00	7
	Other (specify) ▼		300.00	
s	UBTOTAL of Receipts This Page (optional)	•		1400.00
 T	OTAL This Period (last page this line number	only)		

S	CHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 16 / 88
ITEMIZED RECEIPTS			or each category of the	(check only one)
• • • • • • • • • • • • • • • • • • • •	EMIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 11d
				12 13a 13b 14 15
Ar or	ly information copied from such Reports and for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any perso ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	Graves for Congress			
A.	Full Name (Last, First, Middle Initial) Michael A. Merriman			Date of Receipt
	Mailing Address 300 W. 11th			03
	City	State	Zip Code	Transaction ID: 60802.C7194
	Kansas City	MO	64105	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Americo Life Insurance Co.	Occupation	1	Receipt
	Americo Life Insurance Co.	Executive)	Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		2000.00	1
	Other (specify)	0 0	2000.00	
	Full Name (Last, First, Middle Initial)			5. (5.).
В.				Date of Receipt
	Mailing Address 5A Faustiana Place	01 31 2006		
	City	State	Zip Code	Transaction ID: 60802.C6874
	Maryville	MO	64468	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer St Francis Hospital & Hea-	Occupation		Receipt
	<u>Ith S</u>	President		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 0.3.0. 441a(I)/441a-1)
	X Primary General Other (specify) ▼	0 0	250.00	
<u> </u>	Full Name (Last, First, Middle Initial) Mike A. Baumgartner			Date of Receipt
	Mailing Address 5A Faustiana Place	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: 60802.C6873
	Maryville	MO	64468	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		400.00
	Name of Employer	Occupation	1	Receipt
	St Francis Hospital & Hea- lth S	President		Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼		650.00	
				1500.00
s	UBTOTAL of Receipts This Page (optional)		·······	1900.00
Т	OTAL This Period (last page this line number	er only)		

S	CHEDULE A (FEC Form 3)		Use separate schedule(s)	Check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a
Ar or	ny information copied from such Reports and S for commercial purposes, other than using the	tatements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Graves for Congress			
Α.	Full Name (Last, First, Middle Initial) Sandy Holley			Date of Receipt
	Mailing Address 704 Center St			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 60802.C6910
	Rock Port	MO	64482	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Pharmacist	Occupation Self Emp		Receipt Limit Increased Due to Opponent's
	Receipt For: 2006		Sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼	0 0	250.00	
В.	Full Name (Last, First, Middle Initial) Don Reynolds			Date of Receipt
	Mailing Address 401 W. Santa Fe			03 / 29 / Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 60802.C7099
	Marceline	MO	64658	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer North Central Missouri Ba-	Occupation President		Receipt Limit Increased Due to Opponent's
	nk Receipt For: 2006		Sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼	0 0	250.00	
<u> </u>	Full Name (Last, First, Middle Initial) Edith Lee			Date of Receipt
	Mailing Address 1300 NW 43rd Ter.			03 30 2006
	City	State	Zip Code	Transaction ID: 60802.C7169
	Kansas City	MO	64116-1689	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		100.00
	Name of Employer Homemaker	Occupation Homema		Receipt Limit Increased Due to Opponent's
	Receipt For: 2006		Sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼	0 0	1200.00	
s	UBTOTAL of Receipts This Page (optional)			450.00
 	OTAL This Period (last page this line number	only)		

S	CHEDULE A (FEC Form 3	1		FOR LINE NUMBER: PAGE 18 / 88
ITEMIZED RECEIPTS		,	Use separate schedule(s) or each category of the	(check only one)
П	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 11d
				12 13a 13b 14 15
Ar	y information copied from such Reports ar	nd Statements may	not be sold or used by any pers	on for the purpose of soliciting contributions
or		the name and add	dress of any political committee t	o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	Graves for Congress			
<u>/</u>	Full Name (Last, First, Middle Initial)			
A.	Thea McGaugh			Date of Receipt
	Mailing Address 3434 Craig Lane			M M / D D / Y Y Y Y
	2			03 09 2006
	City	State	Zip Code	Transaction ID: 60802.C7015
	Saint Joseph	MO	64506	Amount of Each Receipt this Period
	FEC ID number of contributing	C		100.00
	federal political committee.			
	Name of Employer Retired	Occupation	า	Receipt
	Retired	Retired		Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		250.00	7
	Other (specify) ▼		230.00	
_				
В.	Full Name (Last, First, Middle Initial) Edward L. Fitzpatrick			Date of Receipt
	Mailing Address 3002 Miller Road			M M / D D / Y Y Y Y
	William St. Case Sec. 1911 Co. 1 Toda			03 09 2006
	City	State	Zip Code	Transaction ID: 60802.C6986
	Saint Joseph	MO	64506	Amount of Each Receipt this Period
	FEC ID number of contributing			150.00
	federal political committee.	C		130.00
	Name of Employer	Occupation	า	Receipt
	HP Industrial, Inc.	Executive		Limit Increased Due to Opponent's
	Receipt For: 2006		sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General	1 1	· · · · · · · · · · · · · · · · · · ·	7
	Other (specify)		250.00	
C.	Full Name (Last, First, Middle Initial) Sallie Hart Potter			Date of Receipt
٠.	Mailing Address 3697 County Road	126		Date of Receipt
	Walling Address 5697 County Hoad	130		03 09 2006
	City	State	Zip Code	Transaction ID: 60802.C6941
	Bolckow	MO	64427	Amount of Each Receipt this Period
	FEC ID number of contributing			200.00
	federal political committee.	C		200.00
	Name of Employer	Occupation		Receipt
	Retired	1 .	e Pathologist	Limit Increased Due to Opponent's
	Receipt For: 2006		ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General			
	Other (specify) ▼		392.00	
				450.00
s	UBTOTAL of Receipts This Page (optional	d)		450.00
T	OTAL This Period (last page this line num	ber only)		

S	CHEDIII F A (FEC Form 3	1		FOR LINE NUMBER: PAGE 19 / 88
SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS		,	Use separate schedule(s) or each category of the	(check only one)
Ш	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 11d
			Dotailed Carrinary 1 age	12 13a 13b 14 15
An	y information copied from such Reports ar	nd Statements may	not be sold or used by any pers	on for the purpose of soliciting contributions
or	for commercial purposes, other than using	the name and add	dress of any political committee to	o solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
$ \rangle$	Graves for Congress			
\angle				
	Full Name (Last, First, Middle Initial)			Data of Bassici
Α.	John Wallace			Date of Receipt
	Mailing Address 12631 Lakeland Dr	ive		03 09 2006
	City	State	Zip Code	Transaction ID: 60802.C7037
	Saint Joseph	MO	64506	Amount of Each Receipt this Period
	•	IVIO	04300	Amount of Lach Neceipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Todoral political committee.			Descipt
	Name of Employer Champion Chrysler-Jeep	Occupation		Receipt
		Auto Dea		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006	Election C	tycle-to-Date ▼	Speriding (2 0.3.0. 44 (a(1)/44 (a-1)
	Primary X General	' '	3100.00	
	Other (specify)		3100.00	
В.	Full Name (Last, First, Middle Initial) Robert L. Tritt			Date of Receipt
ъ.	Mailing Address 4206 North Hickory	Long		
	Walling Address 4206 NOITH MICKORY	Lane		03 30 2006
	City	State	Zip Code	Transaction ID: 60802.C7176
	Kansas City	MO	64116-1600	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		500.00
				Receipt
	Name of Employer DST Systems, Inc.	Occupation		<u> </u>
	-	Executive		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006 X Primary General	Election C	ycle-to-Date ▼	
	Other (specify)		500.00	
	Cirici (Specify)	0 0	0 0 0 0 0 0 0	_
	Full Name (Last, First, Middle Initial)			
C.	Larry Hamann			Date of Receipt
	Mailing Address 512 Macon			M M / D D / Y Y Y Y
				03 09 2006
	City	State	Zip Code	Transaction ID: 60802.C6950
	Brookfield	MO	64628	Amount of Each Receipt this Period
	FEC ID number of contributing			100.00
	federal political committee.	C		100.00
	Name of Employer	Occupation	า	Receipt
	Retired	Retired	ı	Limit Increased Due to Opponent's
	Receipt For: 2006		sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General			
	Other (specify)		300.00	
				-
		•		
s	UBTOTAL of Receipts This Page (optional	d)		1600.00
T	OTAL This Period (last page this line num	ber only)		

	CHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 20 / 88
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 11d 11d 12 13a 13b 14 15
Ar or	ny information copied from such Reports and Stator commercial purposes, other than using the r	atements may name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full) Graves for Congress			
Α.	Full Name (Last, First, Middle Initial) Mack A. Porter			Date of Receipt
	Mailing Address PO Box 1330			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 60802.C7170
	Kearney	MO	64060	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Porter Lumber	Occupation Presiden		Receipt Limit Increased Due to Opponent's
	Receipt For: 2006 X Primary General Other (specify) ▼	Election C	ycle-to-Date ▼ 1000.00	Spending (2 U.S.C. 441a(i)/441a-1)
В.	Full Name (Last, First, Middle Initial) Robert Gunderson Mailing Address 20789 County Rd. 306			Date of Receipt
				03 09 2006
	City	State	Zip Code	Transaction ID: 60802.C6994
	Saint Joseph	MO	64505-9367	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		100.00 Receipt
	Name of Employer Phoenix Scientific, Inc.	Occupation Vice Pres	n sident, Regulatory Af	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006 X Primary General Other (specify) ▼	Election C	ycle-to-Date ▼ 400.00	Speriuling (2 0.3.0. 441a(I)/441a-1)
<u> </u>	Full Name (Last, First, Middle Initial) Frank D. Freudenthal			Date of Receipt
	Mailing Address 2909 Lovers Lane			03 09 2006
	City	State	Zip Code	Transaction ID: 60802.C6909
	Saint Joseph	MO	64506	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		200.00
	Name of Employer Retired	Occupation	1	Receipt
	Receipt For: 2006	Retired	ycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼	0 0	200.00	
s	UBTOTAL of Receipts This Page (optional)			1300.00
 -	OTAL This Period (last page this line number o	nlv)	·	

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 88 (check only one) X 11a 11b 11c 11d 11d 13b 14 15
An or	y information copied from such Reports and St for commercial purposes, other than using the	atements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Graves for Congress			
	Full Name (Last, First, Middle Initial) Gail Schinze Mailing Address 10791 State Route A City Saint Joseph FEC ID number of contributing federal political committee. Name of Employer Homemaker Receipt For: 2006 X Primary General Other (specify)	State MO C Occupation Housewith Election C		Date of Receipt M M 29 2006 Transaction ID: 60802.C7056 Amount of Each Receipt this Period 100.00 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Full Name (Last, First, Middle Initial) John Holton Mailing Address 13900 NW 72nd Street City Kansas City FEC ID number of contributing federal political committee. Name of Employer Mail Solutions Receipt For: 2006 Primary X General Other (specify)	State MO C	Zip Code 64152 n Cycle-to-Date ▼	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Full Name (Last, First, Middle Initial) John Holton Mailing Address 13900 NW 72nd Street City Kansas City FEC ID number of contributing federal political committee. Name of Employer Mail Solutions Receipt For: 2006 X Primary General Other (specify)	State MO C Occupation CEO	Zip Code 64152 n Cycle-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SI	JBTOTAL of Receipts This Page (optional)			2200.00
т	OTAL This Period (last page this line number of	only))	

ITEMIZED	LE A (FEC Form 3) RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one) X 11a 11b 12 13a	PAGE 22 / 88 11c 11d 13b 14 15
Any information or for commerce	n copied from such Reports and S ial purposes, other than using the	tatements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of solici solicit contributions from	ting contributions such committee.
\	COMMITTEE (In Full) r Congress				
City Kansas C FEC ID nur federal polit Name of En Clarkson C Receipt For	ity hber of contributing ical committee. hployer onstruction 2006 ry General	State MO C Occupation Vice President C			
Full Name ((specify) ▼ Last, First, Middle Initial) / ress P.O. Box 112	0 0		Date of Receipt 0 3 0 9	2006
	nber of contributing ical committee.	State MO	Zip Code 64466	Transaction ID: 60 Amount of Each Re	0802.C6949
Receipt For X Prima	ephone Co. : 2006	Occupation owner Election C	ocycle-to-Date ▼ 467.00		Due to Opponent's i.C. 441a(i)/441a-1)
Full Name (Don Munce Mailing Add City	Last, First, Middle Initial) ress 350 NW Lakewood Blv	Date of Receipt M M M / D D D D D D D D D D D D D D D D	M M / D D / Y Y Y Y		
	nmit nber of contributing ical committee.	MO C	64064	Amount of Each Re	eceipt this Period
Name of En NRCCOA Receipt For Prima Other	: 2006	Occupation President Election C			Due to Opponent's .C. 441a(i)/441a-1)
SUBTOTAL of	of Receipts This Page (optional)				2700.00
TOTAL This	Period (last page this line number	only)			

SCHEDULE A (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 23 / 88
ITEMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 11d
		Detailed Summary Page	12 13a 13b 14 15
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any perso lress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
Graves for Congress			
Full Name (Last, First, Middle Initial) Don Munce			Date of Receipt
Mailing Address 350 NW Lakewood	Blvde.		03 / 09 / 4 9 9
City	State	Zip Code	Transaction ID: 60802.C6921
Lees Summit	MO	64064	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		2100.00
Name of Employer NRCCOA	Occupation		Receipt
	President	'	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 X Primary General	Election C	ycle-to-Date ▼	1
Other (specify)		4200.00	
Full Name (Last, First, Middle Initial) 3. Robert E. Loch III	I		Date of Receipt
Mailing Address 3401 Stanford Ct.			03 / DD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 60802.C6951
Saint Joseph	MO	64506	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		2100.00
Name of Employer Loch Sand and Construction	Occupation		Receipt
Co. Receipt For: 2006	Vice Pres	ycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
X Primary General	Ziodioi o		1
Other (specify) ▼		2100.00	
Full Name (Last, First, Middle Initial) Sam Cook			Date of Receipt
Mailing Address 238 Madison			03 09 7 2006
City	State	Zip Code	Transaction ID: 60802.C6906
Jefferson City	MO	65101	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer Central Bank	Occupation	1	Receipt
Receipt For: 2006	Banker Flection C	ycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
X Primary General	Ziodion o		1
Other (specify) ▼	0 0	675.00	
SUBTOTAL of Receipts This Page (optional	J)		4300.00
TOTAL This Poyled (lest ness this line and	har anly)		
TOTAL This Period (last page this line num	DEI UIIIY)	.	

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 24 / 88 (check only one) X 11a 11b 11c 11d
			Detailed Summary Page	12 13a 13b 14 15
An or	y information copied from such Reports and St for commercial purposes, other than using the	atements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	Graves for Congress			
۹.	Full Name (Last, First, Middle Initial) Kenneth Sandy			Date of Receipt
	Mailing Address 5751 NW JC Penney D	r		03 09 7 2006
	City	State	Zip Code	Transaction ID: 60802.C7025
	Kidder	MO	64649	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Self Employed	Occupatio	n	Receipt
		Jeweller	Visile to Date.	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006 X Primary General	Election	Cycle-to-Date ▼	1
	Other (specify) ▼	0 0	200.00	
3.	Full Name (Last, First, Middle Initial) James G Robinson			Date of Receipt
	Mailing Address 3404 Stanford Ct	03 / 09 / 4 2006		
	City	State	Zip Code	Transaction ID: 60802.C6942
	Saint Joseph	MO	64506	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2000.00
	Name of Employer Nodaway Valley Bank	Occupatio		Receipt
	Receipt For: 2006	Presiden	t Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General	LIECTION		1
	Other (specify) ▼	0 0	2000.00	
	Full Name (Last, First, Middle Initial) Herbert Sutter			Date of Receipt
	Mailing Address 26287 290th St			03 09 7 9 2006
	City	State	Zip Code	Transaction ID: 60802.C7031
	<u>Fairfax</u>	MO	64446	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer Retired	Occupatio	n	Receipt
		Retired	Syrolo to Doto	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006 X Primary General	Election	Cycle-to-Date ▼	1
	Other (specify) ▼	0 0	100.00	
s	UBTOTAL of Receipts This Page (optional)			2150.00
_			<u> </u>	
T	OTAL This Period (last page this line number of	niy)		

S	CHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 25 / 88 (check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a
Ar or	ny information copied from such Reports and S for commercial purposes, other than using the	tatements may	not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Graves for Congress			
Α.	Full Name (Last, First, Middle Initial) Herbert Sutter			Date of Receipt
	Mailing Address 26287 290th St			03 29 2006
	City	State	Zip Code	Transaction ID: 60802.C7103
	<u>Fairfax</u>	MO	64446	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Retired	Occupation Retired	n	Receipt Limit Increased Due to Opponent's
	Receipt For: 2006		Sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼	0 0	200.00	
В.	Full Name (Last, First, Middle Initial) William Corken			Date of Receipt
	Mailing Address 5484 NE Northgate Cro	03 / 09 / 4 4 4 4 4		
	City	State	Zip Code	Transaction ID: 60802.C6907
	Lees Summit	MO	64064	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Retired	Occupation Retired	n	Receipt Limit Increased Due to Opponent's
	Receipt For: 2006		Sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼	0 0	225.00	
<u>с</u> .	Full Name (Last, First, Middle Initial) John Flournoy			Date of Receipt
	Mailing Address 1135 South Shore			03 30 2006
	City	State	Zip Code	Transaction ID: 60802.C7131
	Kansas City	MO	64151	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Self Employed	Occupation		Receipt
	Receipt For: 2006	Architect Election C	Sycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼	0 0	1150.00	
s	UBTOTAL of Receipts This Page (optional)			1200.00
\vdash	OTAL This Period (last page this line number.			

S	CHEDULE A (FEC Form 3)	Llaa aanarata aahadula(a)	FOR LINE NUMBER: PAGE 26 / 88		
ITEMIZED RECEIPTS		′	Use separate schedule(s) or each category of the	(check only one)		
• • • • • • • • • • • • • • • • • • • •	EIVIIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 11d		
				12 13a 13b 14 15		
Ar or	ny information copied from such Reports and for commercial purposes, other than using the commercial purposes.	Statements may he name and add	not be sold or used by any pers lress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.		
\setminus	NAME OF COMMITTEE (In Full)					
	Graves for Congress					
Α.				Date of Receipt		
	Mailing Address 215 W. 5th St.			03 / 29 / 2006		
	City	State	Zip Code	Transaction ID: 60802.C7060		
	Maryville	MO	64468	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		195.00		
	Name of Employer Dominos Pizza	Occupation	1	Receipt		
	Dominos Pizza	owner		Limit Increased Due to Opponent's		
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)		
	X Primary General	1	495.00	7		
	Other (specify) ▼	0 0	435.00			
В.	Full Name (Last, First, Middle Initial) Brian Peterson	·		Date of Receipt		
	Mailing Address 55 SE 75th			03 09 YYYYY 2006		
	City	State	Zip Code	Transaction ID: 60802.C6924		
	Trenton	MO	64683	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		100.00		
	Name of Employer	Occupation	1	Receipt Receipt		
	Farming	Farmer	•	Limit Increased Due to Opponent's		
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)		
	X Primary General		·	7		
	Other (specify) ▼		200.00			
C.	Full Name (Last, First, Middle Initial) Yvonne Parker			Date of Receipt		
	Mailing Address 9418 N. Laurel Ave.	g Address 9418 N. Laurel Ave.				
	City	State	Zip Code	Transaction ID: 60802.C6888		
	Kansas City	MO	64157	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		250.00		
	Name of Employer Reece and Nichols	Occupation Real Esta		Receipt Limit Increased Due to Opponent's		
	Receipt For: 2006		ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)		
	X Primary General Other (specify) ▼		250.00			
s	SUBTOTAL of Receipts This Page (optional)					
	OTAL This Period (last page this line numb		<u>.</u>			

SCHEDULE A (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 27 / 88
ITEMIZED RECEIPTS	or each category of the	(check only one) X 11a 11b 11c 11d
	Detailed Summary Page	12 13a 13b 14 15
Any information copied from such Reports and Statement	s may not be sold or used by any person	on for the purpose of soliciting contributions
or for commercial purposes, other than using the name ar	nd address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Graves for Congress		
Graves for Congress		
Full Name (Last, First, Middle Initial)		
A. Douglas Shrout Mailing Address 2801 S 7 Highway		Date of Receipt
Mailing Address 2801 S 7 Highway		03 09 2006
City Sta	te Zip Code	Transaction ID: 60802.C7046
Blue Springs MC	O 64014	Amount of Each Receipt this Period
FEC ID number of contributing		300.00
federal political committee.		
Name of Employer Occu City of Blue Springs, Mis-	upation	Receipt
souri		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	tion Cycle-to-Date ▼	Speriding (2 0.3.0. 441a(1)/441a-1)
X Primary General Other (specify) ▼	300.00	
Canor (openity) \(\psi \)	0 0 0 0 0 0 0 0	
Full Name (Last, First, Middle Initial)		
B. Edward Manring		Date of Receipt
Mailing Address 206 N. Seventh St.		03 09 2006
City	te Zip Code	Transaction ID: 60802.C6919
Albany MC	64402	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee		100.00
federal political committee.		100.00
Name of Employer Occu	ıpation	Receipt
Self Employed Attor	rney	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	tion Cycle-to-Date ▼	Spending (2 0.3.0. 441a(1)/441a-1)
X Primary General Other (specify) ▼	200.00	
Other (specify)		1
Full Name (Last, First, Middle Initial)		
C. Robert Nance		Date of Receipt
Mailing Address 314 Concourse		01 31 2006
City	te Zip Code	Transaction ID: 60802.C6900
Excelsior Springs MC	64024	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee		700.00
federal political committee.		
Name of Employer Occu	pation	Receipt
Nances Super own	er	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	tion Cycle-to-Date ▼	Speriding (2 0.3.0. 441a(1)/441a-1)
X Primary General Other (specify) ▼	1200.00	
Other (openity)	0 0 0 0 0 0 0 0	1
		1400.00
SUBTOTAL of Receipts This Page (optional)		1100.00
TOTAL This Period (last page this line number only)		

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 88 (check only one) X 11a 11b 11c 11d 12 13a 13b 14 15
An or	y information copied from such Reports and for commercial purposes, other than using the such as the s	Statements may ne name and add	y not be sold or used by any perse dress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Graves for Congress			
Α.	Full Name (Last, First, Middle Initial) Marie Munce Mailing Address 350 NW Lakewood E City Lees Summit FEC ID number of contributing federal political committee. Name of Employer Homemaker Receipt For: 2006 Primary X General Other (specify)	State MO C Occupatio Homema		Date of Receipt M M D D 2 0 0 6 Transaction ID: 60802.C7214 Amount of Each Receipt this Period 1230.00 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
3.	Full Name (Last, First, Middle Initial) Marie Munce Mailing Address 350 NW Lakewood E City	Blvd.	Zip Code	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Lees Summit FEC ID number of contributing federal political committee. Name of Employer Homemaker Receipt For: 2006 X Primary General Other (specify)	Occupatio Homema		Amount of Each Receipt this Period 2100.00 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C .	Full Name (Last, First, Middle Initial) M.I. McGuire Mailing Address 19100 Fightmaster F City Trimble FEC ID number of contributing federal political committee. Name of Employer Retired Receipt For: 2006 X Primary General Other (specify)	State MO C Occupatio Retired	Zip Code 64492 n Cycle-to-Date ▼	Date of Receipt M
S	UBTOTAL of Receipts This Page (optional))	3430.00
T	OTAL This Period (last page this line number	er only)		

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 88 (check only one)
Ar	ny information copied from such Reports and S for commercial purposes, other than using the	tatements may	not be sold or used by any pers	on for the purpose of soliciting contributions
\(\)	NAME OF COMMITTEE (In Full) Graves for Congress	name and add	areas or any pointed committee of	o solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) M.I. McGuire Mailing Address 19100 Fightmaster Rd			Date of Receipt
	City Trimble	State MO	Zip Code 64492	Transaction ID: 60802.C7117 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00 Receipt
	Name of Employer Retired Receipt For: 2006 X Primary General Other (specify) ▼	Occupation Retired Election C	cycle-to-Date ▼ 450.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
В.	Full Name (Last, First, Middle Initial) David, E. Bahner Mailing Address 3504 Colony Square			Date of Receipt 0 3 0 9 2 0 0 6
	City Saint Joseph	State MO	Zip Code 64506	Transaction ID: 60802.C6965 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer HEDFC Receipt For: 2006 X Primary General Other (specify) ▼	Occupation Consulta		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C.	Full Name (Last, First, Middle Initial) David, E. Bahner Mailing Address 3504 Colony Square			Date of Receipt
	City Saint Joseph	State MO	Zip Code 64506	Transaction ID: 60802.C6964 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer HEDFC Receipt For: 2006 X Primary General Other (specify) ▼	Occupation Consulta		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
s	SUBTOTAL of Receipts This Page (optional)			300.00
Т	OTAL This Period (last page this line number	only)		

IT	CHEDULE A (FEC Form 3 EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 88 (check only one) X 11a 11b 11c 11d 11d 12 13a 13b 14 15
An or	y information copied from such Reports and for commercial purposes, other than using t	d Statements may the name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Graves for Congress			
Α.	Full Name (Last, First, Middle Initial) Ed Wolfe Mailing Address PO Box 613 City Richmond FEC ID number of contributing federal political committee. Name of Employer Self Employed	State MO C Occupation	Zip Code 64085	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Receipt For: 2006 X Primary General Other (specify) ▼	Self Emp	oloyed cycle-to-Date ▼ 825.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
3.	Full Name (Last, First, Middle Initial) John D. Josendale Mailing Address 4613 Manor Dr	•		Date of Receipt 0 3 2 9 2 0 0 6
	City	State	Zip Code	Transaction ID: 60802.C7052
	Saint Joseph FEC ID number of contributing federal political committee.	C	64506	Amount of Each Receipt this Period
	Name of Employer WRCA Receipt For: 2006 X Primary General Other (specify) ▼	Occupation V.P. Sale Election C		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Э.	Full Name (Last, First, Middle Initial) Ben Wierzbicki Mailing Address 113 Delores St			Date of Receipt
	City	State	Zip Code	0 1 3 1 2 0 0 6 Transaction ID: 60802.C6897
	Excelsior Springs FEC ID number of contributing federal political committee.	C	64024	Amount of Each Receipt this Period 500.00
	Name of Employer Self Employed Receipt For: 2006 X Primary General Other (specify) ▼		e Executive cycle-to-Date 1700.00	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
S	UBTOTAL of Receipts This Page (optional)			1100.00
т	OTAL This Period (last page this line numb	er only)		

S	CHEDULE A (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 31 / 88
	EMIZED RECEIPTS	'	or each category of the	(check only one)
•••	EIVIIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 11d
				12 13a 13b 14 15
Ar or	ny information copied from such Reports and for commercial purposes, other than using the commercial purposes.	Statements may he name and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Λ	NAME OF COMMITTEE (In Full)			
	Graves for Congress			
A.	Full Name (Last, First, Middle Initial) Darla Wierzbicki			Date of Receipt
	Mailing Address 113 Delores St			01 31 2006
	City	State	Zip Code	Transaction ID: 60802.C6898
	Excelsior Springs	MO	64024	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Homemaker	Occupation	1	Receipt
	Homemaker	Homema	ker	Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		1500.00	7
	Other (specify) ▼	0 0	1300.00	
В.	Full Name (Last, First, Middle Initial) Steve Schram			Date of Receipt
٥.	Mailing Address 3808 Corinth Ct.			M M / D D / Y Y Y Y
				03 2006
	City	State	Zip Code	Transaction ID: 60802.C6944
	Saint Joseph	MO	64506	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer	Occupation	1	Receipt
	Agri Labs	CEO		Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		550.00	7
	Other (specify) ▼	0 0	550.00	
C.	Full Name (Last, First, Middle Initial) Roland Parker			Date of Receipt
	Mailing Address 412 Old Orchard			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 60802.C6889
	Excelsior Springs	MO	64024	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer	Occupation	1	Receipt
	Excelsior Springs	Mayor		Limit Increased Due to Opponent's
	Receipt For: 2006		ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		-	1
	Other (specify) ▼		500.00	
[•	UBTOTAL of Receipts This Page (optional)			1500.00
\vdash	ODITIAL OF NECERPLS THIS Page (OPLIONAL)			
Ιт	OTAL This Period (last page this line number	er only)		

S	CHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 32 / 88
	EMIZED RECEIPTS		or each category of the	(check only one)
• • • • • • • • • • • • • • • • • • • •	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 11d
				12 13a 13b 14 15
Ar or	ly information copied from such Reports and for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	Graves for Congress			
A.	Full Name (Last, First, Middle Initial) Zachary Wierzbicki			Date of Receipt
	Mailing Address 113 Delores St		7.0.	01 31 2006
	City	State	Zip Code	Transaction ID: 60802.C6896
	Excelsior Springs	MO	64024	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Information Requested	Occupation	1	Receipt
	Information Requested	Informati	on Requested	Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		250.00	7
	Other (specify) ▼	0 0	0 0 0 0 0 0 0	
В.	Full Name (Last, First, Middle Initial) Roberta Keeton			Date of Receipt
υ.	Mailing Address PO Box 687			M M / D D / Y Y Y Y
	Walling Address 1 O Box 667			01 31 2006
	City	State	Zip Code	Transaction ID: 60802.C6901
	Excelsior Springs	MO	64024	Amount of Each Receipt this Period
	FEC ID number of contributing	C		250.00
	federal political committee.			250.00
	Name of Employer	Occupation	า	Receipt
	Global Tech'& Engineering	Self Emp	loyed	Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		250.00	7
	Other (specify)	0 0	250.00	
C.	Full Name (Last, First, Middle Initial) Jerryann S. Nellestein			Date of Receipt
	Mailing Address 4750 NE City Line Ro	ad		M M / D D / Y Y Y Y
				03 09 2006
	City	State	Zip Code	Transaction ID: 60802.C6940
	Saint Joseph	MO	64505	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Self Employed	Occupation	1	Receipt
	Self Employed	Doctor		Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		1000.00	7
	Other (specify) ▼		1000.00	1
		1		1500.00
Ls	UBTOTAL of Receipts This Page (optional) .			1000.00
_	OTAL This Period (last page this line numbe	r only)	,	

SCHEDULE A (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 33 / 88				
TEMIZED RECEIPTS	or each category of the	(check only one) X 11a 11b 11c 11d				
-	Detailed Summary Page	X 11a 11b 11c 11d 11d 12 13a 13b 14 15				
Any information copied from such Reports and Stater or for commercial purposes, other than using the name	ments may not be sold or used by any person ne and address of any political committee to s	for the purpose of soliciting contributions				
NAME OF COMMITTEE (In Full)						
Graves for Congress						
Full Name (Last, First, Middle Initial) Mm. Umbarrger		Date of Receipt				
Mailing Address 29231 S Ave	01-1- 7'- 0-1-	03 09 2006				
City Fairfax	State Zip Code MO 64446	Transaction ID: 60802.C7036 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	200.00				
Retired	Occupation Retired	Receipt Limit Increased Due to Opponent's				
Receipt For: 2006 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 200.00	Spending (2 U.S.C. 441a(i)/441a-1)				
Full Name (Last, First, Middle Initial) Paul Zimmerman		Date of Receipt				
Mailing Address 21718 Outer Rd	7:01	03 / 09 / 2006				
City Rock Port	State Zip Code MO 64482	Transaction ID: 60802.C7042 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	2000.00				
Colf Employed	Occupation Self Employed	Receipt Limit Increased Due to Opponent's				
Receipt For: 2006	Election Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)				
X Primary General Other (specify) ▼	2000.00					
Full Name (Last, First, Middle Initial) Richard Worth		Date of Receipt				
Mailing Address 6529 Ridge Rd		03 / 006				
City Kansas City	State Zip Code MO 64152	Transaction ID: 60802.C7157				
FEC ID number of contributing		Amount of Each Receipt this Period				
federal political committee.	C	1000.00 Receipt				
Worth Harlo's Davidson	Docupation DEO	Limit Increased Due to Opponent's				
Receipt For: 2006 X Primary General Other (specify)	Election Cycle-to-Date ▼ 1000.00	Spending (2 U.S.C. 441a(i)/441a-1)				
SUBTOTAL of Receipts This Page (optional)	SUBTOTAL of Receipts This Page (optional)					
TOTAL This Period (last page this line number only)					

FOR LINE NUMBER: PAGE 34/88 SCHEDULE A (FEC Form 3) Use separate schedule(s) (check only one) or each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 12 13a 13b 14 15 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) **Graves for Congress** Full Name (Last, First, Middle Initial) Pauline Keinath Date of Receipt Mailing Address 12342 Creekhaven Dr 03 30 2006 City Zip Code State Transaction ID: 60802.C7166 Saint Louis MO 63131 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Receipt Name of Employer Homemaker Occupation Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) Housewife Receipt For: 2006 Election Cycle-to-Date X Primary General 250.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	•	250.00
TOTAL This Period (last page this line number only)	•	48675.00

S	CHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 35 / 88
	EMIZED RECEIPTS		or each category of the	(check only one)
•••	EIVIIZED RECEIP I 3		Detailed Summary Page	11a 11b X 11c 11d
				12 13a 13b 14 15
Ar or	ly information copied from such Reports and S for commercial purposes, other than using the	name and add	not be sold or used by any perse dress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
Λ	NAME OF COMMITTEE (In Full)			
	Graves for Congress			
A.	Full Name (Last, First, Middle Initial) Farm Credit PAC			Date of Receipt
	Mailing Address 50 F Street, N.W., Suit			03 / 09 / 2006
	City	State	Zip Code	Transaction ID: 60802.C6912
	Washington	DC	20001	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupation	<u> </u>	Receipt
		,		Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		2000.00	1
	Other (specify)	0 0	2000.00	
_	Full Name (Last, First, Middle Initial)			
В.				Date of Receipt
	Mailing Address Federal Relations 1133 21st Street, NW			03 09 7 2006
	City	State	Zip Code	Transaction ID: 60802.C7044
	Washington	DC	20036-3351	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1000.00
	Name of Francisco	0		Receipt
	Name of Employer	Occupation	I	Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		· · · · · · · · · · · · · · · · · · ·	1
	Other (specify) ▼		1000.00	
C.	Full Name (Last, First, Middle Initial) Promoting Republicans You Can Elect Pro.			Date of Receipt
	Mailing Address 1155 21st St. NW, Suit	te 300		03 31 2006
	City	State	Zip Code	0 3 3 1 2 0 0 6 Transaction ID: 60802.C7199
	Washington	DC	20036	Amount of Each Receipt this Period
	FEC ID number of contributing		2000	
	federal political committee.	C		5000.00
	Name of Employer	Occupation	1	Receipt Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General		10000.00	1
	Other (specify) ▼		10000.00	
[LIPTOTAL of Possints This Page (anticare)			7000.00
\vdash	UBTOTAL of Receipts This Page (optional)			
_	OTAL This Period (last page this line number	only)		

S	CHEDULE A (FEC Form 3)			FOR LINE NUMBER: PAGE 36 / 88
ITEMIZED RECEIPTS	Use separate schedule(s) or each category of the	(check only one)		
	Detailed Summary Page	11a 11b _X 11c 11d		
			,	12 13a 13b 14 15
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	atements may name and ado	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
\geq	Graves for Congress			
Α.	Full Name (Last, First, Middle Initial) National Grain & Feed PAC			Date of Receipt
	Mailing Address 1250 Eye St., NW Ste.	1003		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 60802.C7146
	Washington	DC	20005	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupation	<u> </u>	Receipt
				Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		1000.00	
	Other (specify) ▼	0 0	1000.00	
R	Full Name (Last, First, Middle Initial) Carpenters Legislative Improvement Comm			Date of Receipt
	Mailing Address 101 Constitution Ave NV	N		M M / D D / Y Y Y Y
		•		03 31 2006
	City	State	Zip Code	Transaction ID: 60802.C7180
	Washington	DC	20001	Amount of Each Receipt this Period
	FEC ID number of contributing	C		2500.00
	federal political committee.	0		
	Name of Employer	Occupation	1	Receipt
				Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		2500.00	
	Other (specify)		2300.00	
				i e

SUBTOTAL of Receipts This Page (optional)	•	3500.00
TOTAL This Period (last page this line number only)	•	10500.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS Any information copied from cuch Penerts at			Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 88 (check only one) 11a 11b 11c 11d 11d 12 13a 13b 14 14 15
Any inf	ormation copied from such Reports and commercial purposes, other than using the	Statements may be name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\	ME OF COMMITTEE (In Full) aves for Congress			
A. Ban Mai City Ka FEC	Name (Last, First, Middle Initial) lk of America lling Address 4136 N. Oak Traffic V nsas City C ID number of contributing eral political committee. me of Employer	State MO C Occupation	Zip Code 64116-	Date of Receipt M M
	eeipt For: 2006 Primary General Other (specify) ▼	Election C	ycle-to-Date ▼ 126.48	Spending (2 U.S.C. 441a(i)/441a-1)
A. Ban Mai City Ka FEC fede	nsas City C ID number of contributing eral political committee. me of Employer ceipt For: 2006	State MO C Occupation	Zip Code 64116- 1 1 1082.91	Date of Receipt M M D D Y Y Y Y Y Y Y Y
C. Ban Mai Mai City Ka FEC fedo	nsas City C ID number of contributing eral political committee. me of Employer ceipt For: 2006	State MO C Occupation	Zip Code 64116- 1 Sycle-to-Date ▼ 1088.68	Date of Receipt M M
SUBT	OTAL of Receipts This Page (optional)		·······	972.72
тота	L This Period (last page this line numbe	er only)		

PAGE 38 / 88 FOR LINE NUMBER: SCHEDULE A (FEC Form 3) Use separate schedule(s) (check only one) or each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 12 13a 13b X 15 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) **Graves for Congress** Full Name (Last, First, Middle Initial) Date of Receipt Bank of America Mailing Address 4136 N. Oak Traffic Way 03 09 2006 City State Zip Code Transaction ID: 60802.C7207 Kansas City MO 64116-Amount of Each Receipt this Period FEC ID number of contributing 1017.58 C federal political committee. Interest Received Name of Employer Occupation Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) Receipt For: 2006 Election Cycle-to-Date X Primary General 2106.26 Other (specify) Full Name (Last, First, Middle Initial) B. Bank of America Date of Receipt Mailing Address 4136 N. Oak Traffic Way 0 3 22 2006 City Transaction ID: 60802.C7210 State Zip Code Kansas City MO 64116 Amount of Each Receipt this Period FEC ID number of contributing C 3.40 federal political committee. Interest Received Name of Employer Occupation Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) Receipt For: 2006 Election Cycle-to-Date X Primary General 2109.66 Other (specify)

SUBTOTAL of Receipts This Page (optional)	•	1020.98
TOTAL This Period (last page this line number only)	•	1993.70

SCHEDULE B (FEC Form 3)					FOR	LINE N	IUMBE	R:			PAGE	39 / 88							
IT	EMIZED DISBUF	RSEMENTS	for each	erate schedule(s) category of the	(chec	k only o	• ′	_		_		-							
			Detailed	Summary Page		X	17 20a	\vdash	18 20b	19		19b 21							
An	y Information copied from	such Reports and St	atements may n	ot be sold or used	by any pe	rson for		rpos											
	for commercial purposes,	other than using the																	
$ \rangle$	NAME OF COMMITTEE	(In Full)																	
L	Graves for Congress																		
A.	Full Name (Last, First, Mi Community Press, In-	,							on ID:		2.E2	315							
							Date of Disbursement O 2 O 0 8												
	Mailing Address 101	6 N. Washington					0 2		0	8		2006							
	City Chillicothe		State MO	Zip Code 64601-			Amount of Each Disbursement this Period												
	Purpose of Disbursement					_	L.					463.21							
	PRINTING - LETTERHE	AD ENVEL ETC.									osal of Excess equired Under								
	Candidate Name				Category Type	//			F.R. 40		rea o	ridei							
		I	oursement For:	General			PRIN [°]	TIN	G - LE	ETTE	RHEA	AD ENV-							
	Se			EL E1	ſC.														
	State: Distric		Other (spe	√y) ∀															
_	•	Full Name (Last, First, Middle Initial)									Transaction ID: 60802.E2331								
В.	Lathrop & Gage, LLC) .						of D	isburse										
	Mailing Address 2345 Grand Blvd								[′] 3	0 /	Υ	ž 0 0 6 °							
	City		State	Zip Code			Amou	nt o	f Each	Disbu	seme	nt this Period							
	Kansas City MO 64108-2684								-		•	730.65							
	Purpose of Disbursement POSTAGE LONG-DISTA				B	-fun	d or Di	snosal	of Ex										
	Candidate Name				Category	//	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 POSTAGE LONG-DISTANCE COP- IES												
		<u> </u>			Туре														
	• -	ouse Disk enate	oursement For: Primary	General															
	H -	resident	Other (spe				IES												
	State: Distric	1																	
C.	Full Name (Last, First, Mi Bluffs Catering Co	ddle Initial)							on ID:		2.E2	310							
							M	M M	/ 02		Υ	YYYY							
	Mailing Address 176	44 U.S. Highway	136				0 1		2	3	L.	ž 0 0 6 °							
	City Rock Port		State MO	Zip Code 64482-			Amou	nt o	f Each	Disbui	seme	nt this Period							
	Purpose of Disbursement	<u> </u>	WIO	31102		7					. —	2120.00							
	EVENTS CATERING Candidate Name				Catagon	.,			d or Di butions										
	Candidate Name				Category Type	"			F.R. 40			11001							
	Ŭ →		oursement For:				EVEN	ITS	CATE	ERING	à								
	<u></u>	enate		Primary General Other (specify) ▼							•								
	State: Distric	resident ot:	Other (spe	ony) ♥															
		I					_	_				201000							
s	UBTOTAL of Disburseme	nts This Page (optio	nal)			<u> </u>	<u></u> .					3313.86							
Т.	OTAL This Period (last pa	ge this line number	only)			•													

SCHEDULE B (FEC Form 3)															
		•	-	Use sepe	erate schedule(s)		FOR LINE	_	3EF	₹:			F	PAGE	40 / 88
IT	EMIZED DIS	BURSEMEN	TS	for each	category of the Summary Page		(check only	X 17 20	a [18 20b	П	19a		19b 21
	y Information copied for commercial purp														
\setminus	NAME OF COMMI	TTEE (In Full)													
/	Graves for Cong	ress													
Α.	Full Name (Last, Fi Shawna M. Paul							Da	e o	f Di	on ID sburs	eme			
	Mailing Address	1126 Elm Stree	et					$\begin{bmatrix} M & M & 1 \\ 0 & 2 & M \end{bmatrix} = \begin{bmatrix} D & D & D \\ 2 & 8 \end{bmatrix} = \begin{bmatrix} Y & Y & Y & 0 & Y \\ 2 & 0 & 0 & 6 \end{bmatrix}$							
	City Chillicothe			State MO	Zip Code 64601-			Am	our	nt of	Each	Dis	burs	eme	nt this Period
	Purpose of Disburs	ement			0.00.		-								2000.00
	Candidate Name	Name Category/									d or D oution .R. 40	s Re	quir		
	Office Sought:	House Senate President	Disburse	ment For: Primary Other (spe	General ecify) ▼			SALARY							
		District:													
В.	Full Name (Last, Fi Nova Informatio										on ID sburs	eme		.E23	342
	Mailing Address 7300 Chapman Highway								1		D (3	/	Y	2006
	City Knoxville			State TN	Zip Code 37920-		Am	our	nt of	Each	n Dis	burs	eme	nt this Period	
	Purpose of Disbursement CREDIT CARD PROCESSING FEE							60.00 Refund or Disposal of Excess				60.00			
	Candidate Name	С	ategory/ Type	Contributions Required Under 11 C.F.R. 400.53											
	Office Sought:	House Senate President	Disburse	ment For: Primary Other (spe	General ▼			CR	ED	IT (CARI	D PI	RO	CES	SING FEE
	- 10.10	District:													
C.	Full Name (Last, Fi Automatic Data										on ID sburs			.E23	354
	Mailing Address	400 W. Covina	Blvd.					0	3 '	1	D 3	3 0	/	Y	2006
	City San Dimas			State CA	Zip Code 91773-			Am	our	nt of	Each	n Dis	burs	eme	nt this Period
	Purpose of Disburs					Г			Da	£	d D			4 F	723.08
	Candidate Name Category/ Type								Co	ntrik	d or D oution .R. 40	s Re	equir		
	Office Sought:	House Senate President	Disburse	ment For: Primary Other (spe	General	PAYROLL EXPENSES									
_	State:	District:			· 										
s	UBTOTAL of Disbu	rsements This Page	e (optional)											2	2783.08

S	CHEDULE B (FEC Form 3)	Use sepe	erate schedule(s)		-	LINE NUMBER: PAGE 41 / 88				41 / 88		
IT	EMIZED DISBURSEMENTS	for each	category of the Summary Page	'	check only) آ	y one) X 17	П	18 Г	—	19a 🗀	7 19b	
						20a		20b		20c	21	
	y Information copied from such Reports and Statem for commercial purposes, other than using the name											
\setminus	NAME OF COMMITTEE (In Full)											
\rangle	Graves for Congress											
Α.	Full Name (Last, First, Middle Initial) Shawn Graybill							sburse	men	02.E23 t	363	
	Mailing Address 4443 NE 83rd Terr					0 3	M /	^D 3	0	/ Y	2006	
	City Kansas City	Zip Code 64119-			Amount of Each Disbursement this Period							
	Purpose of Disbursement SALARY				2500.00 cess							
	Candidate Name				egory/ ype			outions .R. 400		uired U	nder	
	Office Sought: Senate President State: Disburse Disburse	ement For: Primary Other (spe	General ecify) ▼			SALA	RY					
В.	Full Name (Last, First, Middle Initial) Shawna M. Pauley					on ID:		02.E23	357			
	Mailing Address 1126 Elm Street City State Zip Code							^D 3	0	/ Y	2 0 0 6 °	
	City Chillicothe			Amou	nt of	Each I	Disb		nt this Period			
	Purpose of Disbursement SALARY Candidate Name			Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53								
			egory/ ype						ildei			
	Senate President	ement For: Primary Other (spe	General ccify) ▼			SALA	RY					
_	State: District: Full Name (Last, First, Middle Initial)					Trans	actio	on ID:	608	02.E23	 343	
C.	Nova Information Systems						of Dis	sburse			YYYY	
	Mailing Address 7300 Chapman Highway					0 2		0	1 1	2	2 0 0 6 °	
	City Knoxville	State TN	Zip Code 37920-			Amou	nt of	Each	Disb	urseme	nt this Period	
	Purpose of Disbursement CREDIT CARD PROCESSING FEE									al of Exc		
	Candidate Name	Туре								uii ca o	idei	
	Senate President	Primary Other (spe	General ecify) ▼			CRED	OIT (CARD	PR	OCES	SING FEE	
	State: District:						-	•			4530.00	
	UBTOTAL of Disbursements This Page (optional)					-	•	•	\Rightarrow			
l T	OTAL This Period (last page this line number only)				. •							

C	CHEDIII E D /EEC Form 2 \									
	CHEDULE B (FEC Form 3)	Use seperate schedule(FOR LINE (check only	NUMBER:	L	PAGE	42 / 88		
IT	EMIZED DISBURSEMENTS	for each category of the		l `	y σne)		9a	7 19b		
		Detailed Summary Page	9		$\frac{1}{20a}$ $\frac{1}{20}$	\square		190		
An	y Information copied from such Reports and Stater	nents may not be sold or us	ed by	anv person f						
	for commercial purposes, other than using the name									
$ \rangle$	NAME OF COMMITTEE (In Full)									
V	Graves for Congress									
_	Full Name (Last, First, Middle Initial)				Transaction	I D : 6080	2.E2	361		
Α.	Shawn Graybill				Date of Disbu	rsement	N.	V V		
	Mailing Address 4443 NE 83rd Terr				011 / 31 / 2006					
	City	State Zip Code			Amount of Ea	ch Disbu	rseme	nt this Period		
	Kansas City	MO 64119-	_				-	2500.00		
	Purpose of Disbursement SALARY				Refund or	Disnosa		1,11,11		
	Candidate Name		7 6	Category/	Contributi	ons Reau				
				Туре	11 C.F.R.	400.53				
		ement For:			SALARY					
	Senate President	Primary General Other (specify) ▼	u							
	State: District:	Ctrici (opeony)								
	Full Name (Last, First, Middle Initial)				Transaction	ID: 6090		252		
В.	Automatic Data Processing, Inc.				Date of Disbu		Z.LZ	002		
	Markey Address (100 M) O. J. Diel		0 1 /	3 1 /	Υ,	2 0 0 6 °				
	Mailing Address 400 W. Covina Blvd.				O I	3 1	4	2000		
	City	State Zip Code CA 91773-			Amount of Ea	ch Disbu	rseme	nt this Period		
	San Dimas					733.02				
	Purpose of Disbursement PAYROLL EXPENSES			Refund or	Disposa	Lof Exc				
	Candidate Name	7 6	Category/	Contributi	ons Requ					
				Туре	11 C.F.R. 400.53					
	ÿ	ement For:			PAYROLL E	XPENS	ES			
	Senate President	Primary General Other (specify) ▼	u							
	State: District:	Other (specify)								
	Full Name (Last, First, Middle Initial)				Transaction	ID: 6090		20416		
C.	Donna M. Turk				Date of Disbu		2.008	504IN		
	Mailing Address 2912 Frederick Ave.				0 1 /	31	Y	2006		
	2912 Flederick Ave.					7.				
	City	State Zip Code			Amount of Ea	ch Disbu	rseme	nt this Period		
	Saint Joseph	MO 64506-290)4					100.00		
	Purpose of Disbursement REFRESHMENTS FOR EVENT				Refund o	Dianaga	Lof Ev			
	Candidate Name	Category/ Type	Contributi	ons Requ						
	Office Sought: House Disburs	ement For:			IN KIND, DEEDES! MENTS ESS					
	Senate	Primary Genera	ıl		IN KIND: REFRESHMENTS FO			IS FUR		
	President	Other (specify)								
_	State: District:									
_ ا	UDTOTAL «(Diskussus to Title Do. (etc.))							3333.02		
\vdash^{s}	UBTOTAL of Disbursements This Page (optional)			•		-		3303.0 <u>Z</u>		

iiayt	26960405548										
	CHEDULE B (FEC Form 3 EMIZED DISBURSEMENTS	for each	perate schedule(s) n category of the d Summary Page	(check only	NUMBER: PAGE 43 / 88 y one) X 17 18 19a 19b 20a 20b 20c 21	_					
	y Information copied from such Reports and for commercial purposes, other than using				or the purpose of solicating contributions						
	NAME OF COMMITTEE (In Full) Graves for Congress					_					
Α.	Full Name (Last, First, Middle Initial) Justin Bush Mailing Address 4610 Roanake Ap	. 00			Transaction ID: 60802.E2323 Date of Disbursement O 2 0 0 8 2 0 0 6						
	City Kansas City	State MO	Zip Code 64112-		Amount of Each Disbursement this Period						
	Purpose of Disbursement FUNDRAISING - PARKING Candidate Name	Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	1							
	Office Sought: House Senate President State: District:	Disbursement For: Primary Other (sp	General pecify) ▼		FUNDRAISING - PARKING						
В.	Full Name (Last, First, Middle Initial) Capitol Hill Club Mailing Address 300 1st Street, S.	Ξ.			Transaction ID: 60802.E2321 Date of Disbursement O 2 D D D V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
	City Washington Purpose of Disbursement FUNDRAISING EXPENSE Candidate Name	Category/ Type	Amount of Each Disbursement this Period 223.26 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53								
	Office Sought: Senate President State: District:	Disbursement For: Primary Other (sp	General pecify) ▼		FUNDRAISING EXPENSE						
C.	Full Name (Last, First, Middle Initial) The Ritz Carlton -Key Biscayne Mailing Address 455 Grand Bay D				Transaction ID: 60802.E2313 Date of Disbursement M						
	City Key Biscayne Purpose of Disbursement FUNDRAISER Candidate Name	State FL	Category/ Type	Amount of Each Disbursement this Period 20967.35 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53]						
	Office Sought: House Senate President State: District:	Disbursement For: Primary Other (sp	General pecify) ▼		FUNDRAISER						

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SUBTOTAL of Disbursements This Page (optional)

SCHEDULE B (FEC Form 3) Use seperate schedule(s							FOR LIN	E NU	MBE	R:			PA	GE	44 / 88
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				Detailed	Summary Page			Ľì.	17 20a		18 20b	$oldsymbol{\sqcup}$	19a 20c	\vdash	19b 21
An	v Information copied	d from such Reports	and Stateme	ents mav n	ot be sold or used	bv i	anv person	$oldsymbol{oldsymbol{\sqcup}}$		rpos		\perp		ontr	
	for commercial purp	ooses, other than usin													
$ \rangle$	NAME OF COMM	, ,													
L	Graves for Con														
Α.	Full Name (Last, F Bales & Associa							- 1			on ID:		-	E23	38
								Г	Date of Disbursement O 3						Y . Y . Y
	Mailing Address	P.O. Box 6424						03 14 2006							
	City Lees Summit			State MO	Zip Code 64064-			Amount of Each Disbursement this Period							
	Purpose of Disburs			•	1 [200.00			
		EPARATION FEE									d or Di				
	Candidate Name						ategory/ Type				butions F.R. 40		quire	a Un	ider
	Office Sought:	House	Disburser					IN	ICO	ME	TAX	PRE	PΑ	RAT	ION FEE
		Senate Primary General President Other (specify) ▼													
	State:	District:		Other (ope	,ony) \										
_	Full Name (Last, F							Т	rans	acti	on ID:	608	02.1	<u>=</u> 23	19
В.	Federal Express	5								_	isburse		t _		
	Mailing Address	1210 Mexico Cit	y Ave					† [0 2	М	′ □0	8	′ L`	Ž	0066
	City		S	State	Zip Code			A	lmou	nt o	f Each	Disb	urse	men	t this Period
	Kansas City			- [-					20.72				
	Purpose of Disburs SHIPPING			l l	De	· · · · · ·	d or D		al af		30.73				
	Candidate Name								Refund or Disposal of Excess Contributions Required Under						
					Туре		11	C.F	F.R. 40	0.53					
	Office Sought:	House	Disburser			•		S	SHIPPING						
		Senate President		Primary Other (spe	General										
	State:	District:		Ctiloi (ope	,⊙y) ∀										
_	Full Name (Last, F							т	rans	acti	on ID:	608	02.1	= 23	34
C.	Aristotle Interna	tional Inc.								_	isburse		t		
	Mailing Address	2285 Peachtree	Rd., Ste.	210				† [0 3	М	′ □0	9	Ĺ	Ž	0 0 6
	City			State	Zip Code			Δ	lmou	nt o	f Each	Dist	urse	men	t this Period
	Atlanta Purpose of Disburs	samant	(GA	30309-	_		- [2	2750.00
	SOFTWARE EXP										d or Di			Exc	ess
	Candidate Name						ategory/ Type	Contributions Required Under 11 C.F.R. 400.53							
	Office Sought: House Disbursement For:							٠,	\cap ET	۱۸/	יסר ר	יחע	באום	_	
	-	Senate		Primary	General			5	UFI	VV A	ARE E	λPl	=INS		
	Ctata	President		Other (spe	ecify)										
	State:	District:						<u> </u>		_			_	_	
s	UBTOTAL of Disbu	ursements This Page	(optional)				▶							2	980.73
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Ι ^Τ	OFAL This Period	(last page this line nu	mber only) .				🕨								

C		\				
	CHEDULE B (FEC Form 3			rate schedule(s)	FOR LINE (check on	E NUMBER: PAGE 45 / 88
IT	EMIZED DISBURSEMENT	S		category of the Summary Page	(oncor on	X 17
	y Information copied from such Reports ar for commercial purposes, other than using					for the purpose of solicating contributions olicit contributions from such committee
\setminus	NAME OF COMMITTEE (In Full)					
	Graves for Congress					
A.	Full Name (Last, First, Middle Initial) Shughart Thomson and Kilroy, P.C) .				Transaction ID: 60802.E2309 Date of Disbursement
	Mailing Address 3101 Frederick A	ve.				$\begin{bmatrix} 0 & 3 & M \\ 0 & 3 & M \end{bmatrix} / \begin{bmatrix} D & D & D \\ 2 & 4 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & 0 & 0 & 6 \\ Y & 2 & 0 & 0 & 6 & 4 \end{bmatrix}$
	City Saint Joseph		tate ⁄IO	Zip Code 64506-		Amount of Each Disbursement this Period
	Purpose of Disbursement REIMB FOR SHIPPING					36.82 Refund or Disposal of Excess
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President		nent For: Primary Other (spe	General cify) ▼		REIMB FOR SHIPPING
	State: District:					
В.	Full Name (Last, First, Middle Initial) Sarah N. Bowles					Transaction ID: 60802.E2360 Date of Disbursement
	Mailing Address 10231 N. Cherry	Dr.				$\begin{bmatrix} 0 & 3 & M \\ 0 & 3 & M \end{bmatrix} / \begin{bmatrix} 0 & 3 & 0 \\ 0 & 3 & 0 \end{bmatrix} / \begin{bmatrix} 0 & 0 & 3 & 0 \\ 0 & 2 & 0 & 0 & 6 \end{bmatrix}$
	City Kansas City		tate ⁄IO	Zip Code 64155-		Amount of Each Disbursement this Period
	Purpose of Disbursement SALARY				2500.00 Refund or Disposal of Excess	
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President		nent For: Primary Other (spe	General		SALARY
	State: District:		- ti.o. (opo	S J / ∀		
	Full Name (Last, First, Middle Initial)					Transaction ID: 60802.E2349
C.	Automatic Data Processing, Inc.					Date of Disbursement
	Mailing Address 400 W. Covina B	llvd.				$\begin{bmatrix} \begin{smallmatrix} M & Z & M \\ D & Z & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & Z & D \\ D & Z & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Q & D & G \\ Y & Z & D & D & G & G \end{bmatrix}$
	City San Dimas		tate CA	Zip Code 91773-		Amount of Each Disbursement this Period
	Purpose of Disbursement PROCESSING FEE					25.00 Refund or Disposal of Excess
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President		nent For: Primary Other (spe	General cify) ▼		PROCESSING FEE
_	State: District:					
s	UBTOTAL of Disbursements This Page (optional)				2561.82

SCI	HEDULE B (FEC Form 3)	Use seperate schedule(s)		NE NUMBER: PAGE 46 / 88				
ITE	MIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(cneck only	(one)				
	nformation copied from such Reports and Statem commercial purposes, other than using the name							
1	IAME OF COMMITTEE (In Full) Graves for Congress							
	full Name (Last, First, Middle Initial) Automatic Data Processing, Inc.			Transaction ID: 60802.E2353 Date of Disbursement				
N	Mailing Address 400 W. Covina Blvd.			$\begin{bmatrix} \begin{smallmatrix} M & 2 & M \\ 0 & 2 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Q \\ 2 & 0 & 0 \end{smallmatrix} \end{bmatrix} $				
		State Zip Code CA 91773-		Amount of Each Disbursement this Period				
P	Purpose of Disbursement PAYROLL EXPENSES Candidate Name		Category/	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53				
	Office Sought: Senate President Disburse State: District:	ement For: Primary General Other (specify)	Туре	PAYROLL EXPENSES				
3. _N	ull Name (Last, First, Middle Initial) /lissouri Dept. of Revenue			Transaction ID: 60802.E2337 Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
N	Mailing Address P.O. Box 34744			03				
	,	State Zip Code MO 64116-		Amount of Each Disbursement this Period				
11	Purpose of Disbursement NCOMES TAXES Candidate Name		Category/	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53				
	Office Sought: House Disburse Senate President District:	ement For: Primary General Other (specify)	Туре	INCOMES TAXES				
_	ull Name (Last, First, Middle Initial) Society Eleemosynary			Transaction ID: 60802.E2340 Date of Disbursement				
N	Mailing Address 712 Spring Street			$\begin{bmatrix} M & M & M \\ O & 3 & M \end{bmatrix} / \begin{bmatrix} D & D & D \\ D & D \end{bmatrix} / \begin{bmatrix} Y & Y & Y & O & O & O \\ Y & Z & O & O & O \end{bmatrix}$				
		State Zip Code MO 64098-		Amount of Each Disbursement this Period				
	Purpose of Disbursement PLATTE COUNTY COMMUNITY BALL			250.00 Refund or Disposal of Excess				
C	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53				
	Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)		PLATTE COUNTY COMMUNITY BALL				
SUE	BTOTAL of Disbursements This Page (optional)		>	1072.02				
тот	FAL This Period (last page this line number only)							

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	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	for each	erate schedule(s) category of the Summary Page	(check onl	NUMBER: PAGE 47 / 88 y one) X 17 18 19a 19b 20a 20b 20c 21
	y Information copied from such Reports and Sta for commercial purposes, other than using the na				for the purpose of solicating contributions
\rangle	NAME OF COMMITTEE (In Full) Graves for Congress				
Α.	Full Name (Last, First, Middle Initial) Shawn Graybill Mailing Address 4443 NE 83rd Terr				Transaction ID: 60802.E2362 Date of Disbursement 0 2
	City Kansas City Purpose of Disbursement SALARY	State MO	Zip Code 64119-		Amount of Each Disbursement this Period 2500.00
	Candidate Name			Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Senate President	Primary Other (spe	General ecify) ▼		SALARY
	State: District:				
В.	Full Name (Last, First, Middle Initial) UMB Visa Mailing Address 1010 Grand Blvd.				Transaction ID: 60802.E2241 Date of Disbursement 0 3 2 9 2 0 0 6
	TOTO GIANG BIVG.				
	City Kansas City	State MO	Zip Code 64106-		Amount of Each Disbursement this Period
	Purpose of Disbursement CREDIT CARD: SEE BELOW Candidate Name			Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President State: Disbut	Primary Other (spe	General ecify) ▼	.,,,,,	CREDIT CARD: SEE BELOW
	Full Name (Last, First, Middle Initial)				Transaction ID: 60802.E2244
C.	Capitol Plaza Hotel				Date of Disbursement
	Mailing Address 415 McCarty				$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 8 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Q & Q & G \\ 2 & 0 & 0 & G \end{smallmatrix} \end{bmatrix}$
	City Jefferson City	State MO	Zip Code 65101-		Amount of Each Disbursement this Period
	Purpose of Disbursement HOTEL EXPENSE			•	65.84
	Candidate Name			Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Senate President	rsement For: Primary Other (spe	General ▼		[MEMO ITEM] MEMO: HOTEL EXPENSE
_	State: District:				
s	UBTOTAL of Disbursements This Page (options	al)		>	2699.52

C/		\				
	CHEDULE B (FEC Form 3	-		erate schedule(s)	FOR LINE (check only	NUMBER: PAGE 48 / 88
IT	EMIZED DISBURSEMENT	S		category of the Summary Page	_ ` <u>-</u> -	X 17
	y Information copied from such Reports a for commercial purposes, other than using					or the purpose of solicating contributions licit contributions from such committee
\setminus	NAME OF COMMITTEE (In Full)					
\rangle	Graves for Congress					
_	Full Name (Last, First, Middle Initial)					Transaction ID: 60802.E2243
Α.	Capitol Plaza Hotel					Date of Disbursement
	Mailing Address 415 McCarty					$\begin{bmatrix} \begin{smallmatrix} M & 2 & M \\ 0 & 2 & M \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 2 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Q & Q & G \\ Y & 2 & 0 & Q & G \end{bmatrix} $
	City		State	Zip Code		Amount of Each Disbursement this Period
	Jefferson City		MO	65101-		65.84
	Purpose of Disbursement HOTEL EXPENSE					Refund or Disposal of Excess
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House	Disburser	ment For:	I		[MEMO ITEM] MEMO: HOTEL EXPENSE
	Senate		Primary	General		MEMO: HOTEL EXPENSE
	President		Other (spe	cify)		
	State: District:					
В.	Full Name (Last, First, Middle Initial) Capitol Plaza Hotel					Transaction ID: 60802.E2242 Date of Disbursement
	Mailing Address 415 McCarty					$\begin{bmatrix} \begin{smallmatrix} M & 2 & M \\ 0 & 2 & M \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} N & 2 & 0 & 0 & 6 \\ 2 & 0 & 0 & 6 \end{bmatrix} $
	City		State MO	Zip Code 65101-		Amount of Each Disbursement this Period
	Jefferson City		67.84			
	Purpose of Disbursement HOTEL EXPENSE		Refund or Disposal of Excess			
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House	Disburser	ment For:			[MEMO ITEM]
	Senate		Primary	General		MEMO: HOTEL EXPENSE
	President		Other (spe	cify)		
	State: District:					
C.	Full Name (Last, First, Middle Initial) Shawna M. Pauley					Transaction ID: 60802.E2355
	Snawna ivi. I auley					Date of Disbursement
	Mailing Address 1126 Elm Street					$\begin{bmatrix} \begin{smallmatrix} M & 1 & M \\ 0 & 1 & M \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} M & 2 & 1 \\ 3 & 1 \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & 2 & 0 & 0 & 6 \\ 1 & 2 & 0 & 0 & 6 \end{bmatrix}$
	City Chillicothe		State MO	Zip Code 64601-		Amount of Each Disbursement this Period
	Purpose of Disbursement		VIO	1		2000.00
	SALARY					Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House	Disburser	ment For:			SALARY
	Senate		Primary	General		UALAITI
	President		Other (spe	cify)		
_	State: District:					
s	UBTOTAL of Disbursements This Page	(optional)				2000.00

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS	Use seperate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 49 / 88 (check only one) X 17
Any Information copied from such Reports and States or for commercial purposes, other than using the name	any person for the purpose of solicating contributions	
NAME OF COMMITTEE (In Full) Graves for Congress		
Full Name (Last, First, Middle Initial) A. Mid States Services Mailing Address 2626 Oklahoma Ave.		Transaction ID: 60802.E2332 Date of Disbursement M M M / D D D / Y Y Y O Y O O O O O O O O O O O O O O
Senate President	State Zip Code MO 64683- cement For: Primary General Other (specify)	Amount of Each Disbursement this Period 74.16 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 WEB HOSTING
State: District:		
B. Pull Name (Last, First, Middle Initial) Donna M. Turk Mailing Address 2912 Frederick Ave.		Transaction ID: 60802.C6903IK Date of Disbursement O 1
City Saint Joseph	State Zip Code MO 64506-2904	Amount of Each Disbursement this Period
Purpose of Disbursement TRANSPORTATION FOR EVENT Candidate Name	C	ategory/ Type 68.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President State: Disburs	ement For: Primary General Other (specify)	IN KIND: TRANSPORTATION FOR EVENT
Full Name (Last, First, Middle Initial) C. Kurtz Rural Aviation		Transaction ID: 60802.E2328 Date of Disbursement
Mailing Address 130 Airport Lane		03
City Mound City	State Zip Code MO 64470-	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL - AVIATION FUEL Candidate Name	C	Type 575.05 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President State: Disburs	ement For: Primary General Other (specify)	TRAVEL - AVIATION FUEL
SUBTOTAL of Disbursements This Page (optional)		717.21

S	CHEDULE B (FEC Form 3)	Use seperate sched	dule(s)	FOR LINE		:	I	PAGE	50 / 88		
IT	EMIZED DISBURSEMENTS	for each category of Detailed Summary F	the ´	(check only	one) X 17 -	18	_ 19	, <u> </u>] 19b		
		Detailed Summary F	rage		20a	20b	20		21		
	y Information copied from such Reports and Statem for commercial purposes, other than using the name										
\vdash	NAME OF COMMITTEE (In Full)										
\rangle	Graves for Congress										
Α.	Full Name (Last, First, Middle Initial) Shughart Thomson and Kilroy, P.C.					ction ID: (Disburser		2.E23	07		
	Mailing Address 3101 Frederick Ave.				01	/ 1	8 /	Ž	006		
	,	State Zip Code MO 64506-			Amount	t of Each [Disbur	semer	nt this Period		
	Purpose of Disbursement REIMB FOR SHIPPING			•	Ref	und or Dis	posal	of Exc	13.74 ess		
	Candidate Name		C	ategory/ Type		tributions C.F.R. 400		red Ur	nder		
	Senate President	ement For: Primary Gereal Control	neral		REIMB	FOR SH	HIPPII	NG			
	State: District: Full Name (Last, First, Middle Initial)				Transa	ction ID: (30802	2.F23	24		
В.	Keelen Communications					Disburser	ment				
	Mailing Address P.O. Box 2776				0 2	0 8	8	2	2006°		
	City State Zip Code Arlington VA 22202-					Amount of Each Disbursement this Period					
	Purpose of Disbursement CONSULTING				Ref	und or Dis	posal		7200.00 ess		
	Candidate Name		C	ategory/ Type		tributions C.F.R. 400		red Ur	nder		
	Senate President	ement For: Primary Ger Other (specify) \blacktriangletaperises	neral		CONSI	JLTING					
	State: District: Full Name (Last, First, Middle Initial)				Transa	ction ID: (ลกลกร	F23			
C.	CM Events				Date of	Disburser	ment				
	Mailing Address 1077 Fairfax Circle West				0 2 M	/ DO	8	2	2006°		
		State Zip Code FL 33436-			Amount	t of Each [Disbur	semer	nt this Period		
	Purpose of Disbursement MAILING	286.87 Refund or Disposal of Excess									
	Candidate Name	ategory/ Type	Contributions Required Under 11 C.F.R. 400.53								
	Senate President	ement For: Primary Ger Other (specify) \blacktriangletap	neral		MAILIN	IG					
	State: District:				_						
s	UBTOTAL of Disbursements This Page (optional) .			<u></u>	<u>L.</u>				7500.61		
Т.	OTAL This Period (last page this line number only)										

S	CHEDULE B (FEC Form 3)	-	NUMBER:	PAGE 51 / 88				
IT	EMIZED DISBURSEMENTS	Use seperate schedule(s) for each category of the Detailed Summary Page	(check only	y one)] 19a			
		, -		20a 20b	20c 21			
	y Information copied from such Reports and Statem for commercial purposes, other than using the name							
\vdash	NAME OF COMMITTEE (In Full)							
	Graves for Congress							
Α.	Full Name (Last, First, Middle Initial) Automatic Data Processing, Inc.			Transaction ID: 60 Date of Disburseme				
	Mailing Address 400 W. Covina Blvd.			02 06	2006			
	,	State Zip Code CA 91773-		Amount of Each Dis	sbursement this Period			
	Purpose of Disbursement PROCESSING FEE			Refund or Dispo				
	Candidate Name		Category/ Type	Contributions R				
	Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)		PROCESSING F	EE			
В.	Full Name (Last, First, Middle Initial) Sarah N. Bowles			Transaction ID: 60 Date of Disburseme				
	Mailing Address 10231 N. Cherry Dr.	0 1 M / D 3 D / Y 2 0 0 6 Y						
	City S Kansas City		Amount of Each Disbursement this Period					
	Purpose of Disbursement SALARY Candidate Name		Category/	Refund or Dispo				
			Type	11 C.F.R. 400.5				
	Senate President	ement For: Primary General Other (specify)		SALARY				
	State: District: Full Name (Last, First, Middle Initial)							
C.	McLaughlin & Associates			Transaction ID: 60 Date of Disbursement	ent			
	Mailing Address 919 Prince Street			03 10	y žoó6°			
		State Zip Code VA 22314-		Amount of Each Dis	sbursement this Period			
	Purpose of Disbursement POLLING	10900.00 Refund or Disposal of Excess						
	Candidate Name	Category/ Type	Contributions Red 11 C.F.R. 400.5					
	Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify) ▼		POLLING				
s	UBTOTAL of Disbursements This Page (optional) .		>		13472.46			
т	OTAL This Period (last page this line number only)		>					

	CHEDULE B (FEC Form 3)) FOR LINE (check only	NUMBER: PAGE 52 / 88	
ΙT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	l ` <u>-</u>	X 17
	y Information copied from such Reports and Statem for commercial purposes, other than using the name			
\rangle	NAME OF COMMITTEE (In Full) Graves for Congress			
Α.	Full Name (Last, First, Middle Initial) AT&T Telelphone Company			Transaction ID: 60802.E2306 Date of Disbursement 0 1
	Mailing Address P.O. Box 940012			01 17 2006
	•	State Zip Code TX 75394-		Amount of Each Disbursement this Period
	Purpose of Disbursement OFFICE PHONE EXPENSE			1474.88 Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		OFFICE PHONE EXPENSE
	State: District:			
В.	Full Name (Last, First, Middle Initial) UMB Visa			Transaction ID: 60802.E2364 Date of Disbursement
	Mailing Address 1010 Grand Blvd.			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 1 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{smallmatrix} \end{bmatrix}$
	,	State Zip Code MO 64106-		Amount of Each Disbursement this Period
	Purpose of Disbursement CREDIT CARD: SEE BELOW			0.00 Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		CREDIT CARD: SEE BELOW
	State: District:	Carior (opcony)		
C.	Full Name (Last, First, Middle Initial) Enterprise Rent-A-Car			Transaction ID: 60802.E2369 Date of Disbursement
	Mailing Address 4103 North Oak Trafficwa	ay		$\begin{bmatrix}\begin{smallmatrix}M\\1&2\end{smallmatrix}\end{bmatrix}^M \begin{bmatrix}\begin{smallmatrix}D\\1&3\end{smallmatrix}\end{bmatrix}^M \begin{bmatrix}\begin{smallmatrix}Y\\2&0&0&5\end{smallmatrix}$
		State Zip Code MO 64116-		Amount of Each Disbursement this Period
	Purpose of Disbursement			278.66
	CAR RENTAL Candidate Name		Category/	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	Туре	[MEMO ITEM] MEMO: CAR RENTAL
	State: District:	Carol (Specify)		
s	UBTOTAL of Disbursements This Page (optional) .		>	1474.88

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	HEDULE B (FEC FEMIZED DISBURSI	•	for each ca	ate schedule(s) ategory of the ummary Page	(check only	NUMBER: PAGE 53 / 88 y one) X 17 18 19a 19b 20a 20b 20c 21
						for the purpose of solicating contributions solicit contributions from such committee
	NAME OF COMMITTEE (In I					
A . (Full Name (Last, First, Middle Office Depot Mailing Address 8501 N	Initial) orth Evanston Av	enue			Transaction ID: 60802.E2367 Date of Disbursement 1 2 D / Y Y Y O Y 5 Y
- - - -	City Kansas City Purpose of Disbursement OFFICE SUPPLIES			Zip Code 64157-		Amount of Each Disbursement this Period 46.59 Refund or Disposal of Excess
Ō	Office Sought: House Senate Presid State: District:		ement For: Primary Other (speci	General ▼	Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: OFFICE SUPPLIES
B	Full Name (Last, First, Middle Travel Tyme Mailing Address 1904 C	Initial)				Transaction ID: 60802.E2365 Date of Disbursement M
	City Chillicothe			Zip Code 64601-		Amount of Each Disbursement this Period
(Purpose of Disbursement CREDIT AIRFARE Candidate Name					-399.20 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Office Sought: House Senate Presid State: District:		ement For: Primary Other (speci	General fy) ▼		MEMO: CREDIT AIRFARE
	Full Name (Last, First, Middle USPS-Liberty	Initial)				Transaction ID: 60802.E2366 Date of Disbursement
N	Mailing Address 1000 P	rogress Dr				12 7 7 2 7 7 2 0 0 5
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SUBTOTAL of Disbursements This Page (optional)

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	y Information copied from such Reports and Statem for commercial purposes, other than using the name								
\rangle	NAME OF COMMITTEE (In Full) Graves for Congress								
Α.	Full Name (Last, First, Middle Initial) Federal Express Mailing Address 1210 Mexico City Ave		Transaction ID: 60802.E2318 Date of Disbursement M M M / D D D / Y Y Y O O O O O O O O O O O O O O O O						
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В.	Full Name (Last, First, Middle Initial) 24 Carrot Creations Mailing Address 7820 Highway E		Transaction ID: 60802.E2305 Date of Disbursement O 1 D D V Y Y O O 6						
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C.	Full Name (Last, First, Middle Initial) Automatic Data Processing, Inc.			Transaction ID: 60802.E2351 Date of Disbursement					
	Mailing Address 400 W. Covina Blvd.			03					
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\setminus	NAME OF COMMITTEE (In Full)								
\rangle	Graves for Congress								
Α.	Full Name (Last, First, Middle Initial) Sarah N. Bowles					Disburs	: 60802. ement	E23	59
	Mailing Address 10231 N. Cherry Dr.				0 ^M 2 M	/ D2	28 /	Ý Ž	006
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<u> </u>	Full Name (Last, First, Middle Initial) Community Press, Inc.					ction ID:	: 60802.	E23	14
	Mailing Address 1016 N. Washington				0 2 M		06 /	Ž	006
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\rangle	NAME OF COMMITTEE (In Full) Graves for Congress								
Α.	Full Name (Last, First, Middle Initial) Bistro Biz			Transaction ID: 60802.E2320 Date of Disbursement					
	Mailing Address 15 E. Street NW			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$					
		State Zip Code DC 20001-		Amount of Each Disbursement this Period					
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	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53					
	Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		FUNDRAISING EXPENSE					
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В.	Full Name (Last, First, Middle Initial) Community Press, Inc.			Transaction ID: 60802.E2316 Date of Disbursement					
	Mailing Address 1016 N. Washington			03 7 06 7 2006					
	,	State Zip Code MO 64601-		Amount of Each Disbursement this Period					
	Purpose of Disbursement PRINTING - LETTERHEAD ENVEL ETC.		89.96 Refund or Disposal of Excess						
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53					
	Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	•	PRINTING - LETTERHEAD ENV- EL ETC.					
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C.	Full Name (Last, First, Middle Initial) UMB Visa			Transaction ID: 60802.E2371 Date of Disbursement					
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C.	Full Name (Last, First, MUMB Visa	Middle Initial)								i on I isbu				E23	80
	Mailing Address 10	10 Grand Blv	d.					1 M) ^M	/ [0	^D 7	1	Ž	005
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NAME OF COMMITTEE (In Full) Graves for Congress					
Full Name (Last, First, Middle Initial) A. UMB Visa			Transaction ID: 60802.E2379 Date of Disbursement		
Mailing Address 1010 Grand Blvd.			1 0 M / 0 7 / Y Y Y O Y 5 Y		
City Kansas City	State Zip Code MO 64106-		Amount of Each Disbursement this Period		
Purpose of Disbursement BANK CHARGE Candidate Name		Category/	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
Office Sought: House Disburs Senate President State: District:	sement For: Primary General Other (specify)	Туре	[MEMO ITEM] MEMO: BANK CHARGE		
Full Name (Last, First, Middle Initial) B. UMB Visa			Transaction ID: 60802.E2377 Date of Disbursement		
Mailing Address 1010 Grand Blvd.			1 1 M		
City Kansas City	State Zip Code MO 64106-		Amount of Each Disbursement this Period		
Purpose of Disbursement BANK CHARGE Candidate Name	Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53			
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Full Name (Last, First, Middle Initial) C. UMB Visa			Transaction ID: 60802.E2378 Date of Disbursement		
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City Kansas City	State Zip Code MO 64106-		Amount of Each Disbursement this Period		
Purpose of Disbursement BANK CHARGE	Purpose of Disbursement				
Candidate Name	Candidate Name Category				
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	y Information copied from such Reports and Statem for commercial purposes, other than using the name			for the purpose of solicating contributions
\rangle	NAME OF COMMITTEE (In Full) Graves for Congress			
Α.	Full Name (Last, First, Middle Initial) UMB Visa			Transaction ID: 60802.E2375 Date of Disbursement 1 2 0 7 2 0 0 5
	Mailing Address 1010 Grand Blvd.			12 07 2003
	,	State Zip Code MO 64106-		Amount of Each Disbursement this Period
	Purpose of Disbursement BANK FEE		•	29.00 Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)),r	[MEMO ITEM] MEMO: BANK FEE
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В.	Full Name (Last, First, Middle Initial) UMB Visa			Transaction ID: 60802.E2376 Date of Disbursement
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	Purpose of Disbursement BANK CHARGE		7.50 Refund or Disposal of Excess	
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	Senate President	ement For: Primary General Other (specify)		[MEMO ITEM] MEMO: BANK CHARGE
	State: District: Full Name (Last, First, Middle Initial)			
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		State Zip Code MO 64108-2684		Amount of Each Disbursement this Period
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	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
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\rangle	NAME OF COMMITTEE (In Full) Graves for Congress								
Α.	Full Name (Last, First, Middle Initial) UMB Visa Mailing Address 1010 Grand Blvd.				Transaction ID: 60802.E2203 Date of Disbursement 0 2				
	Mailing Address 1010 Grand Blvd. City Kansas City Purpose of Disbursement	State MO	Zip Code 64106-		Amount of Each Disbursement this Period 6271.90				
	CREDIT CARD: SEE BELOW Candidate Name			Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53				
	Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spe	General ecify) ▼		CREDIT CARD: SEE BELOW				
В.	Full Name (Last, First, Middle Initial) Oceanaire Seafood Room Mailing Address 1201 F Street, NW				Transaction ID: 60802.E2205 Date of Disbursement 1 2 0 7 2 0 0 5				
	City Washington	State DC	Zip Code 20004-		Amount of Each Disbursement this Period				
	Purpose of Disbursement FUNDRAISING EVENT Candidate Name			Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53				
	Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spe	General ecify) ▼	,	[MEMO ITEM] MEMO: FUNDRAISING EVENT				
C.	Full Name (Last, First, Middle Initial) UMB Visa				Transaction ID: 60802.E2207 Date of Disbursement				
	Mailing Address 1010 Grand Blvd.				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} D & D \\ O & 1 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} Y & Y & Y & Y & Y \\ Z & O & O & G \end{smallmatrix} $				
	City Kansas City	State MO	Zip Code 64106-		Amount of Each Disbursement this Period 80.56				
	Purpose of Disbursement BANK FEES Candidate Name			Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53				
	Office Sought: House Disbursi Senate President	ement For: Primary Other (spe	General ecify) ▼	т урс	[MEMO ITEM] MEMO: BANK FEES				
	State: District:		-, •						
s	UBTOTAL of Disbursements This Page (optional)				6271.90				

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS			Use sep	erate schedule(s)		-	E NUMBER: PAGE 62 / 88							
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	y Information copied from si for commercial purposes, of													
\setminus	NAME OF COMMITTEE (In Full)												
\rangle	Graves for Congress													
Α.	Full Name (Last, First, Mid UMB Visa	dle Initial)					Date	of D	isburs	emen	02.E2			
	Mailing Address 1010 Grand Blvd.								$\begin{array}{c ccccccccccccccccccccccccccccccccccc$					
	City		State	Zip Code			Amou	int o	f Each	Disk	ourseme	ent this Period		
	Kansas City		МО	64106-				-	-			39.00		
	Purpose of Disbursement BANK FEES						B	ofun	d or D	ienoe	al of Ex			
	Candidate Name	Ca	ategory/	C	ontri	bution	s Red	quired l						
						Туре	11 [MEM]		F.R. 40					
	Office Sought: Hou			MEM				ES .						
		nate sident	Primary Other (spe	General										
	State: District		_ Ctrior (opt	5 0 y) ▼										
	Full Name (Last, First, Mid	dle Initial)					Trans	acti	on ID	: 608	02.E2	344		
В.	Nova Information Syst	ems							isburs		-			
	Mailing Address 7300 Chapman Highway							М	[/] D) 1	/ Y	2006		
	City Knoxville		State TN		Amou	int o	f Each	n Disb	ourseme	ent this Period				
	Purpose of Disbursement CREDIT CARD PROCES			30.00 Refund or Disposal of Excess										
	Candidate Name	Category/ Type Contributions Required Under												
		Disburse nate sident	ement For: Primary Other (spe	General			CREI	TIC	CARI	D PF	ROCES	SSING FEE		
	State: District			·										
^	Full Name (Last, First, Mid										02.E2	350		
C.	Automatic Data Proces	ssing, Inc.						_	isburs		it	V * V * V		
	Mailing Address 400 V	W. Covina Blvd.					0 ^M 3	М	[/] D	8 (/ L	Ž 0 Ŏ 6 Š		
	City San Dimas		State CA	Zip Code 91773-			Amou	int o	f Each	Dist	ourseme	ent this Period		
	Purpose of Disbursement					•						72.46		
	PROCESSING FEE				Ļ						al of Exquired U			
	Candidate Name		ategory/ Type			F.R. 40			nuei					
	Office Sought: Hou	ght: House Disbursement For:				71	PROCESSING FEE							
	H	nate	Primary	General			PHO	ノニこ	SINC	2 FE	_			
		sident	Other (spe	ecify) 🔻										
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	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use seperate schedule(s for each category of the Detailed Summary Page	(check onl	NUMBER:				
	y Information copied from such Reports and Statem for commercial purposes, other than using the name			for the purpose of solicating contributions				
	NAME OF COMMITTEE (In Full) Graves for Congress	c and address of any pointed		SOLUTION OF THE STATE OF THE ST				
Α.	Full Name (Last, First, Middle Initial) Service Center Internal Revenue Mailing Address			Transaction ID: 60802.E2336 Date of Disbursement O 3 M / D 1 4 V Y Y O 0 6 Y				
	City Ogden Purpose of Disbursement INCOME TAXES	State Zip Code UT 84201-		Amount of Each Disbursement this Period 250.00 Refund or Disposal of Excess				
	Candidate Name Office Sought: House Senate President State: District:	ement For: Primary	Category/ Type	Contributions Required Under 11 C.F.R. 400.53 INCOME TAXES				
В.	Full Name (Last, First, Middle Initial) UMB Visa Mailing Address 1010 Grand Blvd.			Transaction ID: 60802.E2267 Date of Disbursement M M M / D D D / Y Y Y O O O				
	Kansas City Purpose of Disbursement CREDIT CARD: SEE BELOW Candidate Name	State Zip Code MO 64106- ement For: Primary General Other (specify)	Category/ Type	Amount of Each Disbursement this Period 9023.84 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CREDIT CARD: SEE BELOW				
C.	Full Name (Last, First, Middle Initial) AT&T Telelphone Company Mailing Address P.O. Box 940012			Transaction ID: 60802.E2271 Date of Disbursement On 1 Do 0 D V Y Y 0 0 6				
	Dallas Purpose of Disbursement OFFICE PHONE EXPENSE Candidate Name	State Zip Code TX 75394- ement For: Primary General Other (specify)	Category/ Type	Amount of Each Disbursement this Period 732.73 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: OFFICE PHONE EXPENSE				
s	UBTOTAL of Disbursements This Page (optional)		>	9273.84				

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS	Use seperate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one) X 17
		rany person for the purpose of solicating contributions mmittee to solicit contributions from such committee
NAME OF COMMITTEE (In Full) Graves for Congress		
Full Name (Last, First, Middle Initial) A. Awards & T-Shirt Specialists, Inc. Mailing Address 10400 E 63rd St., Ste	A	Transaction ID: 60802.E2293 Date of Disbursement 0 2
City Kansas City Purpose of Disbursement CUPES FOR LINCOLN DAYS EVENT Candidate Name Office Sought: House Senate President State: District:	State Zip Code MO 64133- rsement For: Primary General Other (specify)	Amount of Each Disbursement this Period 392.89 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: CUPES FOR LINCOLN DAYS EVENT
Full Name (Last, First, Middle Initial) B. Awards & T-Shirt Specialists, Inc. Mailing Address 10400 E 63rd St., Ste	A	Transaction ID: 60802.E2277 Date of Disbursement O 1
City Kansas City Purpose of Disbursement CUPS FOR FUDRAISING EVENT Candidate Name Office Sought: House Senate President State: District:	State Zip Code MO 64133- rsement For: Primary General Other (specify)	Amount of Each Disbursement this Period 285.50 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: CUPS FOR FUDRAISING
Full Name (Last, First, Middle Initial) Berbiglia Wine & Spirit Mailing Address 8300 N Church Road City Kansas City Purpose of Disbursement	State Zip Code MO 64158-	Transaction ID: 60802.E2290 Date of Disbursement M M M D 3 1 Y Y Y O 0 6 Amount of Each Disbursement this Period
Candidate Name Office Sought: House Disbuserate President State: District:	rsement For: Primary General Other (specify)	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: REFRESHMENTS FOR LI- NCOLN DAYS
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	SCHEDULE B (FEC Form 3			rate schedule(s)	FOR LINE (check onli	NUMBER: PAGE 65 / 88				
ITEMIZED DISBURSEMENT		rs		category of the Summary Page	` <u>-</u>	X 17				
	y Information copied from such Reports a for commercial purposes, other than usin					or the purpose of solicating contributions licit contributions from such committee				
\setminus	NAME OF COMMITTEE (In Full)									
\rangle	Graves for Congress									
_	Full Name (Last, First, Middle Initial)					Transaction ID: 60802.E2273				
Α.	Federal Express Shipping					Date of Disbursement				
	Mailing Address PO Box 94515					$ \begin{bmatrix} 0 & 1 & M$				
	City		State	Zip Code		Amount of Each Disbursement this Period				
	Palatine	l	L	60094-		10.10				
	Purpose of Disbursement SHIPPING CHARGES		Refund or Disposal of Excess							
	Candidate Name	Category/	Contributions Required Under							
					Type	11 C.F.R. 400.53 [MEMO ITEM]				
	Office Sought: House	Disburser				MEMO: SHIPPING CHARGES				
	Senate President		Primary Other (spe	General						
	State: District:		Other (Spe	O., y) ▼						
	Full Name (Last, First, Middle Initial)					Transaction ID: 60802.E2274				
В.	Federal Express Shipping					Date of Disbursement				
	Mailing Address PO Box 94515		01 15 7 2006							
	City		State	Zip Code		Amount of Each Disbursement this Period				
	Palatine	I	L	60094-		15.26				
	Purpose of Disbursement SHIPPING CHARGES		Refund or Disposal of Excess							
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53						
	Office Sought: House	Disburser	ment For:			[MEMO ITEM] MEMO: SHIPPING CHARGES				
	Senate		Primary	General		MEMO. OF IN 1 INCO OF INTERES				
	State: President District:		Other (spe	сіту) 🔻						
	Full Name (Last, First, Middle Initial)					Transaction ID: 60802.E2269				
C.	Federal Express Shipping					Date of Disbursement				
	Mailing Address PO Box 94515					$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 1 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 8 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{smallmatrix} \end{bmatrix}$				
	City Palatine		State L	Zip Code 60094-		Amount of Each Disbursement this Period				
	Purpose of Disbursement					31.19				
	SHIPPING CHARGES				Catanani	Refund or Disposal of Excess Contributions Required Under				
	Candidate Name				Category/ Type	11 C.F.R. 400.53				
	Office Sought: House	Disburser	nent For:		71	[MEMO ITEM]				
	Senate		Primary	General		MEMO: SHIPPING CHARGES				
	President		Other (spe	cify) 🔻						
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9	CHEDULE B (FEC Form 3)	1 505	INE NUMBER: PAGE 66 / 88					
	· ·	Use seperate schedule(s)	(check onl					
Ш	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		X 17 18 19a 19b 20a 20b 20c 21				
	y Information copied from such Reports and State for commercial purposes, other than using the nan							
Λ	NAME OF COMMITTEE (In Full)							
\backslash	Graves for Congress							
Α.	Full Name (Last, First, Middle Initial) Federal Express Shipping			Transaction ID: 60802.E2272 Date of Disbursement				
	Mailing Address PO Box 94515	01 11 2006						
	011							
	City Palatine	State Zip Code IL 60094-		Amount of Each Disbursement this Period				
	Purpose of Disbursement SHIPPING CHARGES			27.86 Refund or Disposal of Excess				
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53				
	Senate President	ement For: Primary General Other (specify) ▼	•	[MEMO ITEM] MEMO: SHIPPING CHARGES				
_	State: District:							
В.	Full Name (Last, First, Middle Initial) Hy-Vee Foods			Transaction ID: 60802.E2298 Date of Disbursement				
	Mailing Address 1332 H 152 Highway	$\begin{bmatrix} \begin{smallmatrix} M & M \\ D & Z \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & S \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y \\ Z & D & D \\ G & S \end{smallmatrix} $						
	City Liberty		Amount of Each Disbursement this Period					
	Purpose of Disbursement OFFICE SUPPLIES		10.96 Refund or Disposal of Excess					
	Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53					
	Office Sought: House Disburs Senate President	ement For: Primary General Other (specify)		[MEMO ITEM] MEMO: OFFICE SUPPLIES				
	State: District:							
C.	Full Name (Last, First, Middle Initial) Kinkos			Transaction ID: 60802.E2285 Date of Disbursement				
	Mailing Address 7201 N. Oak Trafficway	$\begin{bmatrix} \begin{smallmatrix} M & M & M \\ O & 1 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 6 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{bmatrix}$						
	City	State Zip Code		Amount of Each Disbursement this Period				
	Kansas City	MO 64118-						
	Purpose of Disbursement PRINTING INVITATIONS	37.04 Refund or Disposal of Excess						
	Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53					
	Office Sought: House Disburs Senate President	ement For: Primary General Other (specify) ▼		- [MEMO ITEM] - MEMO: PRINTING INVITATIONS				
	State: District:	· · (-1)/ •						
s	UBTOTAL of Disbursements This Page (optional)		>	0.00				

S	CHEDULE B (FEC Form 3)		FOR LINE I	E NUMBER: PAGE 67/88				
	EMIZED DISBURSEMENTS	Use seperate schedule(s) for each category of the Detailed Summary Page	(check only	one)				
	y Information copied from such Reports and Statem for commercial purposes, other than using the name							
\rangle	NAME OF COMMITTEE (In Full) Graves for Congress							
Α.	Full Name (Last, First, Middle Initial) Kinkos Mailing Address 7201 N. Oak Trafficway	Transaction ID: 60802.E2291 Date of Disbursement O 1						
	City	State Zip Code MO 64118-		Amount of Each Disbursement this Period				
	Purpose of Disbursement PRINITNG INVITATIONS Candidate Name		Category/	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53				
	Senate President	ement For: Primary General Other (specify)	Туре	[MEMO ITEM] MEMO: PRINITNG INVITATIONS				
	State: District: Full Name (Last, First, Middle Initial)			T				
В.	Kinkos			Transaction ID: 60802.E2284 Date of Disbursement				
	Mailing Address 7201 N. Oak Trafficway			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 1 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & E \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & O & O & G \\ Y & E & O & O & G \end{bmatrix} $				
		State Zip Code MO 64118-		Amount of Each Disbursement this Period				
	Purpose of Disbursement PRINTING INVITATIONS		5.36 Refund or Disposal of Excess					
	Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53					
	Senate President	ement For: Primary General Other (specify)		[MEMO: TEM] MEMO: PRINTING INVITATIONS				
	State: District: Full Name (Last, First, Middle Initial)			T ID 00000 F0004				
C.	Marriott Hotels			Transaction ID: 60802.E2304 Date of Disbursement				
	Mailing Address 200 W. 12th Street		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & Z \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ O & D \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & O & O & O \\ Y & Z & O & O & O \end{bmatrix} $					
		State Zip Code MO 64105-		Amount of Each Disbursement this Period				
	Purpose of Disbursement CREDIT ON HOTEL ROOM		•	-201.88				
	Candidate Name	Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53					
	Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)	71: -	[MEMO ITEM] MEMO: CREDIT ON HOTEL ROOM				
	State: District:							
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SCHEDULE B (FEC Form 3)			3)	Use sepe	erate schedule(s)		E NUMBER: PAGE 68 / 88				
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							n for the purpose of solicating contributions solicit contributions from such committee				
\setminus	NAME OF COMM	IITTEE (In Full)									
\rangle	Graves for Con	igress									
Α.	Full Name (Last, First, Middle Initial) Marriott Hotels						Transaction ID: 60802.E2302 Date of Disbursement				
	Mailing Address	200 W. 12th Str	eet				$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$				
	City			State	Zip Code		Amount of Each Disbursement this Period				
	Kansas City			MO	64105-		123.82				
	Purpose of Disbu	rsement					Refund or Disposal of Excess				
	Candidate Name					Category/	Contributions Required Under				
						Туре	11 C.F.R. 400.53 [MEMO ITEM]				
	Office Sought:	House	Disburse		Camanal		MEMO: HOTEL ROOM				
		Senate President		Primary Other (spe	General						
	State:	District:		Othor (ope	∀						
_	Full Name (Last, I	First, Middle Initial)					Transaction ID: 60802.E2296				
В.	Marriott Hotels						Date of Disbursement				
	Mailing Address 200 W. 12th Street						$\begin{array}{c ccccccccccccccccccccccccccccccccccc$				
	City			State MO	Zip Code 64105-		Amount of Each Disbursement this Period				
	Kansas City Purpose of Disbut		443.32								
	Candidate Name	OR LINCOLN DAYS	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53								
	Office Sought:	House Senate President	Disburse	ment For: Primary Other (spe	General ▼	Туре	MEMO ITEM] MEMO: HOTEL ROOM FOR LINC- OLN DAYS EVENT				
	State:	District:									
C.	Full Name (Last, I Marriott Hotels	First, Middle Initial)					Transaction ID: 60802.E2303 Date of Disbursement				
	Mailing Address	200 W. 12th Str	eet				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$				
	City Kansas City			State MO	Zip Code 64105-		Amount of Each Disbursement this Period				
	Purpose of Disbu	rsement					110.83 Refund or Disposal of Excess				
	Candidate Name					Category/ Type	Contributions Required Under 11 C.F.R. 400.53				
	Office Sought:	House Senate President	Disburse	ment For: Primary Other (spe	General	·	MEMO: HOTEL ROOM				
	State:	District:		(- -	<i>→</i>						
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			Detailed	Summary Page		X 17 20a	a [_	18 20b		19a 20a		19b 21	
	ny Information copied from such Reports for commercial purposes, other than usin													
Ν	NAME OF COMMITTEE (In Full)													
V	Graves for Congress													
Α.	Full Name (Last, First, Middle Initial) Mortons of KC						Transaction ID: 60802.E2297 Date of Disbursement							
	Mailing Address 2475 Grand Ave								$ \begin{bmatrix} M & 2 & M \\ 0 & 2 & M \end{bmatrix} / \begin{bmatrix} D & 0 & 0 \\ 0 & 0 & 3 \end{bmatrix} / \begin{bmatrix} Y & 2 & 0 & 0 & 6 \\ 2 & 0 & 0 & 6 \end{bmatrix} $					
	City State Zip Code Kansas City MO 64108-								Amount of Each Disbursement this Period					
	Purpose of Disbursement FUNDRAISING EVENT								inc	or D)is	posal o	of Exc	588.02 cess
	Candidate Name	Category/ Type								R. 4	00	Requir).53	ed U	nder
	Office Sought: House Senate President		ent For: Primary Other (spe	General ▼			[MEMO ITEM] MEMO: FUNDRAISING EVENT							
	State: District:													
В.	Full Name (Last, First, Middle Initial) Office Depot									on ID sburs		60802 ment	.E22	286
	Mailing Address 8501 North Evanston Avenue						0	1 M	/	D	2 (^D /	Y	2006
	City State Zip Code Kansas City MO 64157-								of	Eacl	n [Disburs	emei	nt this Period
	Purpose of Disbursement FUNDRAISING EVENT SUPPLIES			Refund or Disposal of Excess										
	Candidate Name	Cate Ty							Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]					nder
	Office Sought: House Senate President		ent For: Primary Other (spe	General			MEMO: FUNDRAISING EVENT SUPPLIES						VENT	
	State: District:		` '	<i>37</i> , 4										
C.	Full Name (Last, First, Middle Initial) Party America						Transaction ID: 60802.E2288 Date of Disbursement							
	Mailing Address 8450 North Chu	rch Road					0		/	D,	3 (0 /	Y	2006
	City Kansas City		ate IO	Zip Code 64158-			Am	ount	of	Eacl	n [Disburs	emei	nt this Period
	Purpose of Disbursement						1							38.50
	SUPPLIES FOR FUNDRAISING EVENT Candidate Name C						Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53							
	Office Sought: House Senate	Туре		МО :	וו S	ЕМ] 'L		OR I	FUNDRA-				
	State: President District:		Other (spe	ecity) 🔻										
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SCHEDULE B (FEC Form 3)	Use seperate schedule(s)		IE NUMBER: PAGE 70 / 88						
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Any Information copied from such Reports and State or for commercial purposes, other than using the nar									
NAME OF COMMITTEE (In Full)									
Graves for Congress									
Full Name (Last, First, Middle Initial) A. Party America			Transaction ID: 60802.E2292 Date of Disbursement						
Mailing Address 8450 North Church Roa	d		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 1 \end{smallmatrix} \end{bmatrix} \ \ \ \begin{bmatrix} \begin{smallmatrix} M & M \\ O & I \end{smallmatrix} \end{bmatrix} \ \ \ \ \ \begin{bmatrix} \begin{smallmatrix} M & M \\ O & I \end{smallmatrix} \end{bmatrix} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$						
City Kansas City	State Zip Code MO 64158-		Amount of Each Disbursement this Period						
Purpose of Disbursement SUPPLIES FOR LINCOLN DAYS EVENT			16.37 Refund or Disposal of Excess						
Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53							
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify)		MEMO: SUPPLIES FOR LINCOLN DAYS EVENT						
Full Name (Last, First, Middle Initial)			Transaction ID: 60802.E2275						
3. Party America									
Mailing Address 8450 North Church Roa		0 1 M / D 1 7 Y 2 0 0 6 Y							
City Kansas City	State Zip Code MO 64158-		Amount of Each Disbursement this Period						
Purpose of Disbursement SUPPLIES FOR FUNRAISER			Refund or Disposal of Excess						
Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]						
Senate President	ement For: Primary General Other (specify)		MEMO: SUPPLIES FOR FUNRALSER						
State: District: Full Name (Last, First, Middle Initial)									
Party America			Transaction ID: 60802.E2279 Date of Disbursement 0 1						
Mailing Address 8450 North Church Roa	Mailing Address 8450 North Church Road								
City Kansas City	State Zip Code MO 64158-		Amount of Each Disbursement this Period 76.65						
Purpose of Disbursement SUPPLIES FOR FUNDRAISING EVENT	'								
Candidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53						
Senate President	ement For: Primary General Other (specify)	,	[MEMO ITEM] MEMO: SUPPLIES FOR FUNDRA- ISING EVENT						
State: District:									
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	SCHEDULE B (FEC Form 3			erate schedule(s)	FOR LINE (check only	NUMBER: PAGE 71 / 88
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	y Information copied from such Reports a for commercial purposes, other than using					for the purpose of solicating contributions licit contributions from such committee
\setminus	NAME OF COMMITTEE (In Full)					
	Graves for Congress					
_	Full Name (Last, First, Middle Initial)					Transaction ID: 60802.E2276
Α.	Party America					Date of Disbursement
	Mailing Address 8450 North Chu	rch Road				$\begin{bmatrix} \begin{smallmatrix} M & 1 & M \\ 0 & 1 & M \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 7 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Q & Q & G \\ Y & Z & Q & Q & G \end{bmatrix}$
	City		State	Zip Code		Amount of Each Disbursement this Period
	Kansas City	ſ	MO	64158-		51.50
	Purpose of Disbursement SUPPLIES FOR FUNDRAISING EVEN		Refund or Disposal of Excess			
	Candidate Name	Category/	Contributions Required Under			
		Туре	11 C.F.R. 400.53 [MEMO ITEM]			
	Office Sought: House Senate	Disburser	nent For: Primary	General		MEMO: SUPPLIES FOR FUNDRA-
	President		Other (spe			ISING EVENT
	State: District:		(-1	- 3 / \		
_	Full Name (Last, First, Middle Initial)					Transaction ID: 60802.E2283
В.	Soli Printing					Date of Disbursement
	Mailing Address 2012 Swift		$\begin{bmatrix} \begin{smallmatrix} M & 1 & M \\ 0 & 1 & M \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 9 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Q & Q & G \\ Y & 2 & 0 & Q & G \end{bmatrix}$			
	City		State MO	Zip Code 64116-		Amount of Each Disbursement this Period
	Kansas City		203.61			
	Purpose of Disbursement PRINTING OF EVENTS AND REPLY (Refund or Disposal of Excess				
	Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]			
	Office Sought: House	Disburser				MEMO: PRINTING OF EVENTS
	Senate President		Primary Other (spe	General		AND REPLY CARDS
	State: District:		Other (spe	City) \blacktriangledown		
	Full Name (Last, First, Middle Initial)					Transaction ID: 60802.E2300
C.	Soli Printing					Date of Disbursement
	Mailing Address 2012 Swift					$\begin{bmatrix} \begin{smallmatrix} M & Z & M \\ O & Z & M \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ O & S \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ Z & O & O & G \end{smallmatrix} \end{bmatrix} $
	City Kansas City		State MO	Zip Code 64116-		Amount of Each Disbursement this Period
	Purpose of Disbursement					149.24
	LETTER HEAD					Refund or Disposal of Excess Contributions Required Under
	Candidate Name				Category/ Type	11 C.F.R. 400.53
	Office Sought: House	Disburser	ment For:		. , , , ,	[MEMO ITEM]
	Senate		Primary	General		MEMO: LETTER HEAD
	President		Other (spe	cify)		
_	State: District:					
s	UBTOTAL of Disbursements This Page	(optional)				0.00

SCHEDULE B (FEC Form 3) Use seperate scho				_		R LINE NUMBER: PAGE 72/88					
ITEMIZED DISBURSEMENTS		for each of Detailed S	category of the Summary Page	(01		17 18 19a 19b 20a 20b 20c 21					
	y Information copied from such Reports and Staten for commercial purposes, other than using the nam										
\setminus	NAME OF COMMITTEE (In Full)										
L	Graves for Congress										
A.	Full Name (Last, First, Middle Initial) USPS-Liberty					Transaction ID: 60802.E2270 Date of Disbursement 0 1 D D D Z O O 6					
	Mailing Address 1000 Progress Dr					01 09 2006					
	City Liberty	State MO	Zip Code 64068-			Amount of Each Disbursement this Period					
	Purpose of Disbursement POSTAGE					Refund or Disposal of Excess					
	Candidate Name			Categ		Contributions Required Under 11 C.F.R. 400.53					
	Senate President	ement For: Primary Other (spe	General cify) ▼			[MEMO ITEM] MEMO: POSTAGE					
_	State: District: Full Name (Last, First, Middle Initial)										
В.						Transaction ID: 60802.E2287 Date of Disbursement					
	Mailing Address 820 Armour Rd					$\begin{bmatrix} 0 & 1 & M & M & M & M & M & M & M & M & M$					
	City Kansas City	State MO	Zip Code 64116-			Amount of Each Disbursement this Period					
	Purpose of Disbursement POSTAGE				Refund or Disposal of Excess Contributions Required Under						
	Candidate Name	Candidate Name									
	Office Sought: House Disburse Senate President	ement For: Primary Other (spe	General			[MEMO: POSTAGE					
	State: District:	_	J								
C.	Full Name (Last, First, Middle Initial) Wal-Mart					Transaction ID: 60802.E2295 Date of Disbursement					
	Mailing Address 8301 N. Church Rd.					$ \begin{bmatrix} 0 & 2 & M \\ 0 & 2 & M \end{bmatrix} $ $ \begin{bmatrix} 0 & 0 & D \\ 0 & 0 & M \end{bmatrix} $ $ \begin{bmatrix} 0 & 0 & D \\ 0 & 0 & M \end{bmatrix} $ $ \begin{bmatrix} 0 & 0 & M \\ 0 & 0 & M \end{bmatrix} $ $ \begin{bmatrix} 0 & 0 & M \\ 0 & 0 & M \end{bmatrix} $					
	City Kansas City	State MO	Zip Code 64158-			Amount of Each Disbursement this Period					
	Purpose of Disbursement REFRESHMENTS FOR LINCOLN DAYS EVEN	т			-	153.97					
	Candidate Name	jory/	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53								
	Office Sought: House Disburse Senate President	ement For: Primary Other (spe	General	71-		[MEMO ITEM] MEMO: REFRESHMENTS FOR LINCOLN DAYS EVENT					
	State: District:	_ Julior (spe	O.1.y.) ▼								
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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS		Use seperate schedule(s)	FOR LINE (check only	NUMBER: PAGE 73 / 88				
		for each category of the Detailed Summary Page	_ i `	X 17 18 19a 19b 20a 20b 20c 21				
	y Information copied from such Reports and Stater for commercial purposes, other than using the nam							
$\overline{\ }$	NAME OF COMMITTEE (In Full)							
/	Graves for Congress							
۹.	Full Name (Last, First, Middle Initial) Automatic Data Processing, Inc.			Transaction ID: 60802.E2346 Date of Disbursement				
	Mailing Address 400 W. Covina Blvd.			$\begin{bmatrix} \begin{smallmatrix} M & 1 & M \\ 0 & 1 & M \end{smallmatrix} & \begin{smallmatrix} I & D & D \\ 1 & 8 & M \end{smallmatrix} & \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{smallmatrix} \end{bmatrix}$				
	City San Dimas	State Zip Code CA 91773-		Amount of Each Disbursement this Period				
	Purpose of Disbursement PROCESSING FEE			89.15 Refund or Disposal of Excess				
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53				
	Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify)		PROCESSING FEE				
3.	Full Name (Last, First, Middle Initial) UMB Visa			Transaction ID: 60802.E2256 Date of Disbursement				
	Mailing Address 1010 Grand Blvd.		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & 2 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & O & G \end{smallmatrix} \end{bmatrix} $					
	City Kansas City	State Zip Code MO 64106-		Amount of Each Disbursement this Period				
	Purpose of Disbursement CREDIT CARD: SEE BELOW			682.19 Refund or Disposal of Excess				
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53				
	Senate President	ement For: Primary General Other (specify) ▼		CREDIT CARD: SEE BELOW				
	State: District: Full Name (Last, First, Middle Initial)							
Э.	Bullfeathers of Captial Hill			Transaction ID: 60802.E2261 Date of Disbursement				
	Mailing Address 410 1st St SE 1		$\begin{bmatrix} \begin{smallmatrix} M & 1 & M \\ 0 & 1 & M \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 3 & 1 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{smallmatrix} \end{bmatrix} $					
	City Washington	State Zip Code DC 20003-		Amount of Each Disbursement this Period				
	Purpose of Disbursement		36.01 Refund or Disposal of Excess					
	Candidate Name	UNCH W/ CONSTITUENT Candidate Name Categ Typ						
	Senate President	ement For: Primary General Other (specify) ▼	. 75-2	[MEMO ITEM] MEMO: LUNCH W/ CONSTITUENT				
	State: District:							
s	SUBTOTAL of Disbursements This Page (optional)		>	771.34				
								

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SCHEDULE B (FEC Form 3)			nedule(s)	FOR LINE (check only	NUMBER: PAGE 74 / 88
IT	EMIZED DISBURSEMENTS	for each category Detailed Summa		· ·	X 17 18 19a 19b 20a 20b 20c 21
	y Information copied from such Reports and Si for commercial purposes, other than using the				
\rangle	NAME OF COMMITTEE (In Full) Graves for Congress				
Α.	Full Name (Last, First, Middle Initial) Bullfeathers of Captial Hill				Transaction ID: 60802.E2262 Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 410 1st St SE 1				01 31 2006
	City Washington	State Zip Co DC 2000			Amount of Each Disbursement this Period
	Purpose of Disbursement DINNER W/ CONSTITUENT			0 0	94.08 Refund or Disposal of Excess
	Candidate Name			ategory/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disk Senate President	oursement For: Primary Other (specify)	General		[MEMO ITEM] MEMO: DINNER W/ CONSTITUE- NT
	State: District:				
В.	Full Name (Last, First, Middle Initial) Capitol Hill Club				Transaction ID: 60802.E2260 Date of Disbursement
	Mailing Address 300 1st Street, S.E.	01 26 7 2006			
	City Washington	State Zip Co			Amount of Each Disbursement this Period
	Purpose of Disbursement FUNDRAISING EVENT	631.44 Refund or Disposal of Excess			
	Candidate Name	ategory/ Type	Contributions Required Under		
	Senate President	oursement For: Primary Other (specify)	General		[MEMO ITEM] MEMO: FUNDRAISING EVENT
	State: District:				
C.	Full Name (Last, First, Middle Initial) Congressional Institutional Institute				Transaction ID: 60802.E2265 Date of Disbursement
	Mailing Address 316 Pennsylvania Av	e., SE #403			$\begin{bmatrix} \begin{smallmatrix} M & Z & M \\ O & Z \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & S \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & O & G \end{smallmatrix} Y$
	City Washington		Amount of Each Disbursement this Period		
	Purpose of Disbursement REFUND ON HOUSE CONRESSIONAL RE	TREA			-471.50 Refund or Disposal of Excess
	Candidate Name		C	ategory/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Dist Senate President	oursement For: Primary Other (specify)	General		[MEMO ITEM] MEMO: REFUND ON HOUSE CON- RESSIONAL RETREA
_	State: District:				
s	UBTOTAL of Disbursements This Page (option	nal)		▶	0.00

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11	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	1 ` <u>-</u>	X 17					
	y Information copied from such Reports and Staten for commercial purposes, other than using the nam								
$\overline{\ }$	NAME OF COMMITTEE (In Full)								
	Graves for Congress								
۹.	Full Name (Last, First, Middle Initial) Automatic Data Processing, Inc.			Transaction ID: 60802.E2345 Date of Disbursement					
	Mailing Address 400 W. Covina Blvd.			$\begin{bmatrix} \begin{smallmatrix} M & 1 & M \\ 0 & 1 & M \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 0 & 5 \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Q & Q & Q & G \\ Y & Q & Q & Q & G \end{bmatrix}$					
	City San Dimas	State Zip Code CA 91773-		Amount of Each Disbursement this Period					
	Purpose of Disbursement PROCESSING FEE		•	74.36 Refund or Disposal of Excess					
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53					
	Office Sought: Senate President State: Disburse Disburse	ement For: Primary General Other (specify)		PROCESSING FEE					
	Full Name (Last, First, Middle Initial)			Transaction ID: 60802.E2339					
3.	Splendid Fare			Date of Disbursement					
	Mailing Address 1310 Braddock Place	$\begin{bmatrix} 0 & 3 & M \\ 0 & 3 & M \end{bmatrix} / \begin{bmatrix} 0 & 1 & 7 \\ 0 & 1 & 7 \end{bmatrix} / \begin{bmatrix} 0 & 0 & 1 & 1 \\ 0 & 2 & 0 & 0 & 6 \end{bmatrix}$							
	City Alexandria	State Zip Code VA 22314-		Amount of Each Disbursement this Period					
	Purpose of Disbursement FUNDRAISING EXPENSE		763.74 Refund or Disposal of Excess						
	Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53						
	Senate President	ement For: Primary General Other (specify)		FUNDRAISING EXPENSE					
	State: District:								
Э.	Full Name (Last, First, Middle Initial) Shughart Thomson and Kilroy, P.C.			Transaction ID: 60802.E2308 Date of Disbursement					
	Mailing Address 3101 Frederick Ave.		$\begin{bmatrix} \begin{smallmatrix} M & 2 & M \\ 0 & 2 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{smallmatrix} \end{bmatrix}$						
	City Saint Joseph	State Zip Code MO 64506-		Amount of Each Disbursement this Period					
	Purpose of Disbursement REIMB FOR SHIPPING	0	16.51 Refund or Disposal of Excess						
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53					
	Office Sought: House Disburse Senate President	ement For: Primary General Other (specify) \(\bigvert		REIMB FOR SHIPPING					
	State: District:								
S	UBTOTAL of Disbursements This Page (optional)		>	854.61					

S	CHEDULE B (FEC Form 3)			LEODLINE	NUMBER: DAGE 70 / 00				
	·	Use sepera	ate schedule(s)	(check only	NUMBER: PAGE 76 / 88 y one)				
	EMIZED DISBURSEMENTS		ategory of the ummary Page		X 17 18 19a 19b 20a 20b 20c 21				
	y Information copied from such Reports and for commercial purposes, other than using the								
\setminus	NAME OF COMMITTEE (In Full)								
V	Graves for Congress								
A.	Full Name (Last, First, Middle Initial) UMB Visa				Transaction ID: 60802.E2245 Date of Disbursement				
	Mailing Address 1010 Grand Blvd.				$\begin{bmatrix} \begin{smallmatrix} M & 2 & M \\ 0 & 2 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 1 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{smallmatrix} Y$				
	City Kansas City	State MO	Zip Code 64106-		Amount of Each Disbursement this Period				
	Purpose of Disbursement CREDIT CARD: SEE BELOW		Г	• •	1745.41 Refund or Disposal of Excess				
	Candidate Name		C	Category/ Type	Contributions Required Under 11 C.F.R. 400.53				
	Office Sought: House Senate President	Primary Other (spec	General ify) ▼		CREDIT CARD: SEE BELOW				
	State: District:								
В.	Full Name (Last, First, Middle Initial) Capitol Hill Club				Transaction ID: 60802.E2248 Date of Disbursement				
	Mailing Address 300 1st Street, S.E	 E.			$\begin{bmatrix} M & M \\ 12 & M \end{bmatrix} / \begin{bmatrix} D & D \\ 08 \end{bmatrix} / \begin{bmatrix} Y & 2005 \\ 2005 \end{bmatrix}$				
	City Washington	State DC	Zip Code 20003-		Amount of Each Disbursement this Period				
	Purpose of Disbursement FUNDRAISER				223.26 Refund or Disposal of Excess				
	Candidate Name		C	Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]				
	Office Sought: House Senate President	Primary Other (spec	General		MEMO: FUNDRAISER				
	State: District:	Cirici (spec	"y) ▼						
C.	Full Name (Last, First, Middle Initial) Congressional Institutional Institute				Transaction ID: 60802.E2255 Date of Disbursement				
	Mailing Address 316 Pennsylvania	Ave., SE #403			$\begin{bmatrix}\begin{smallmatrix}M\\01\end{smallmatrix}\end{bmatrix}^M \begin{smallmatrix}D\\04\end{smallmatrix} \begin{smallmatrix}D\\04\end{smallmatrix} \begin{smallmatrix}Y\\2006\end{smallmatrix}$				
	City Washington	State DC	Zip Code 20002-		Amount of Each Disbursement this Period				
	Purpose of Disbursement HOUSE CONGRESSIONAL RETREAT	943.00 Refund or Disposal of Excess							
	Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53						
	Office Sought: House Senate President	Primary Other (spec	General		[MEMO ITEM] MEMO: HOUSE CONGRESSIONAL RETREAT				
	State: District:								
s	UBTOTAL of Disbursements This Page (op	otional)			1745.41				

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	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use seperate schedule(s) for each category of the Detailed Summary Page	(check onl	NUMBER: PAGE 77 / 88 y one) X 17 18 19a 19b 20a 20b 20c 21			
	y Information copied from such Reports and Statem for commercial purposes, other than using the name			for the purpose of solicating contributions			
\rangle	NAME OF COMMITTEE (In Full) Graves for Congress						
Α.	Full Name (Last, First, Middle Initial) DAgge Florist Mailing Address 18 East Franklin			Transaction ID: 60802.E2252 Date of Disbursement 1 2			
	City Liberty Purpose of Disbursement	State Zip Code MO 64068-		Amount of Each Disbursement this Period 53.68			
	FUNDRAISING GIFT Candidate Name Office Sought: House Senate	ement For: Primary General	Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: FUNDRAISING GIFT			
	State: President State: District: Full Name (Last, First, Middle Initial)	Other (specify)		Transaction ID: C0000 F0040			
B.	Dubliner Restaurant Mailing Address 520 N Capitol St, NW			Transaction ID: 60802.E2246 Date of Disbursement M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	City Washington	State Zip Code DC 20001-		Amount of Each Disbursement this Period			
	Purpose of Disbursement ENTERTAIN CONSTITUENT Candidate Name	Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53				
	Office Sought: House Senate President State: District:	ement For: Primary General Other (specify)		[MEMO ITEM] MEMO: ENTERTAIN CONSTITUE- NT			
C.	Full Name (Last, First, Middle Initial)			Transaction ID: 60802.E2250 Date of Disbursement			
	Mailing Address 1904 Clay Street			12 M / 10 / Y Y Y Y Y Y			
	City Chillicothe Purpose of Disbursement		Amount of Each Disbursement this Period 20.00				
	AGENT FEE Candidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53			
	Senate President	ement For: Primary General Other (specify)	.,,,,,	[MEMO ITEM] MEMO: AGENT FEE			
	State: District:		_	0.00			
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SCHEDULE 8 (FEC Form 3) ITEMIZED DISBURSEMENTS Or each category of the bedieved from such Reports and Statements may not be sold or used by any person for the purpose of solicating contributions for or commencial purposes, other than using the name and address of any political committee to solicit contributions from such committee	Ū	20300403303				
Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicating contributions or for commencial purposes, other than using the name and address of any political committee to solicit contributions from such committee		•	for each o	ategory of the	(check only	y one) X 17
A Traves for Congress Full Name (Last, First, Middle Initial) A Travel Tyme Mailing Address 1904 Clay Street City Chillicothe MO 64601- Purpose of Disbursement AIRFARE Candidate Name Office Sought: House State: District: Full Name (Last, First, Middle Initial) City Washington Office Sought: House						or the purpose of solicating contributions
A. Travel Tyme Mailing Address 1904 Clay Street City State Zip Code Chillicothe MO 64601- Purpose of Disbursement AIRFARE Candidate Name Office Sought: House Senate Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) B. U.S. House of Representatives Mailing Address U.S. Capitol City State Zip Code Other (specify) ▼ City Washington DC 20515- Category Categ	\rangle	• • •				
Critilicothe MO 64601- Purpose of Disbursement AlRFARE Candidate Name Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) B. U.S. House of Representatives Mailing Address U.S. Capitol Office Sought: House Disbursement For: Senate President President President President Senate President President President Senate President P	Α.	Travel Tyme				Date of Disbursement
Office Sought:		Chillicothe Purpose of Disbursement AIRFARE			Category/	130.20 Refund or Disposal of Excess Contributions Required Under
B. U.S. House of Representatives Mailing Address U.S. Capitol		Senate President	Primary			[MEMO ITEM]
Washington DC 20515- Purpose of Disbursement CONSTITUENT GIFT Candidate Name Office Sought: House President Primary General District: Full Name (Last, First, Middle Initial) C. Axiom Strategies LLC Mailing Address 1104 Wellington Way City State Zip Code Liberty MO 64068- Purpose of Disbursement CONSULTING Candidate Name Office Sought: House Disbursement For: Category/ Type Transaction ID: 60802.E2311 Date of Disbursement O 1	В.	U.S. House of Representatives				Date of Disbursement
Full Name (Last, First, Middle Initial) Axiom Strategies LLC Mailing Address 1104 Wellington Way City State Zip Code Liberty MO 64068- Purpose of Disbursement CONSULTING Candidate Name Office Sought: House Senate Primary General Other (specify) Tope State: District: Transaction ID: 60802.E2311 Date of Disbursement Date of Disbursement Disbursement Transaction ID: 60802.E2311 Date of Disbursement Code 64068- Amount of Each Disbursement this Period Category/ Type Contributions Required Under 11 C.F.R. 400.53 CONSULTING CONSULTING		Washington Purpose of Disbursement CONSTITUENT GIFT Candidate Name Office Sought: House Senate President	ement For:	20515-		76.10 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
Liberty Purpose of Disbursement CONSULTING Candidate Name Office Sought: House Senate President President State: Disbursement For: Senate Primary General Other (specify) Table 1 Category/ Type Category/ Type Contributions Required Under 11 C.F.R. 400.53 CONSULTING	C.	Full Name (Last, First, Middle Initial) Axiom Strategies LLC				Date of Disbursement
SUBTOTAL of Disbursements This Page (optional)		Liberty Purpose of Disbursement CONSULTING Candidate Name Office Sought: House Senate President	ement For:	64068-		5000.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	s	UBTOTAL of Disbursements This Page (optional)			>	5000.00

SCHEDULE B (FEC Form 3)			FOR LINE	INE NUMBER: PAGE 79 / 88					
ITEMIZED DISBURSEMENTS		Use seperate s for each categor	(check only						
••	LIMIZED DISDOTISEMENTS	Detailed Summ	ary Page		X 17 20a	18 20b	19a 20c		19b 21
	y Information copied from such Reports and Staten for commercial purposes, other than using the nam								
\setminus	NAME OF COMMITTEE (In Full)								
$ \rangle$	Graves for Congress								
Α.	Full Name (Last, First, Middle Initial) The Lukens Company				Transaction Date of Di			E23	12
	Mailing Address 2800 Shirlington Road				0 2	0	^D /	Ž	0 0 6
	City Arlington		Code 202-		Amount of	Each	Disburse	men	t this Period
	Purpose of Disbursement MAILING		Г		Refund	d or Dis	sposal of	-	893.84 ess
	Candidate Name			Category/ Type	Contrib 11 C.F		Require 0.53	d Un	der
	Office Sought: House Disburse Senate President	ement For: Primary Other (specify)	General ▼		MAILING				
	State: District:								
В.	Full Name (Last, First, Middle Initial) UMB Visa				Transaction Date of Display	-		E22	80
	Mailing Address 1010 Grand Blvd.					$\begin{bmatrix} 0 & 3 & M \\ 0 & 3 & M \end{bmatrix} / \begin{bmatrix} D & D & D \\ 2 & 8 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & 0 & 0 \\ 2 & 0 & 0 & 6 \end{bmatrix}$			0 0 6
	City Kansas City		Code 06-		Amount of	Each	Disburse	emen	t this Period
	Purpose of Disbursement CREDIT CARD: SEE BELOW					sposal of			
	Candidate Name	C	Category/ Type	Contributions Required Under 11 C.F.R. 400.53		der			
	Office Sought: House Disburse Senate President	ement For: Primary Other (specify)	General		CREDIT CARD: SEE BELOW				
	State: District:	Ctrici (Specify)	V						
С.	Full Name (Last, First, Middle Initial) Bullfeathers of Captial Hill				Transaction			E22	10
	Mailing Address 410 1st St SE 1		02	^D 1	^D / [Ž	0 0 6 Y		
	City Washington		Code 003-		Amount of	Each	Disburse	men	t this Period
	Purpose of Disbursement						154.80		
	LUNCH W/ CONSTITUENT Candidate Name	Category/		outions	sposal of Require				
	Office Sought: House Disburse Senate President	ement For: Primary Other (specify)	General	Туре	[MEMO I	ГЕМ]		ONS	STITUENT
_	State: District:								
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	y Information copied from such Rep for commercial purposes, other than												
$\overline{\ }$	NAME OF COMMITTEE (In Full)												
/	Graves for Congress												
۹.	Full Name (Last, First, Middle Initia UMB Visa	l)						of D	isburs	eme	ent	.E22	15
	Mailing Address 1010 Grand	Blvd.					0 3	М	[/] 2	28	/	Ý Ž	006
	City Kansas City		State MO	Zip Code 64106-			Amou	int o	f Each	n Dis	sburs	emen	t this Period
	Purpose of Disbursement BANK FEE						B	efun	d or D	isno	nsal o	of Exc	18.36
	Candidate Name				Catego		Co	ontri C.F	bution: F.R. 40	s R 00.5	equir		
	Office Sought: Senate President State: District:	Disburse	ment For: Primary Other (spe	General cify) ▼			MEMO: BANK FEE						
3.	Full Name (Last, First, Middle Initia UMB Visa	l)						of D	isburs	eme	ent	.E22	14
	Mailing Address 1010 Grand	Blvd.			03 M / 07					/	ž	006	
	City Kansas City		State MO	Zip Code 64106-			Amou	int o	f Each	n Dis	sburs	emen	t this Period
	Purpose of Disbursement BANK FEE					Refund or Disposal of Excess				39.00 ess			
	Candidate Name		Catego Typo	-	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]					der			
	Office Sought: House Senate President State: District:	Disburse	ment For: Primary Other (spe	General ccify) ▼			MEM		_		ΞE		
	Full Name (Last, First, Middle Initia												
Э.	US House Members Dining	u <i>)</i>					Date		on ID:	eme	ent		
	Mailing Address Longworth HOB								[′]	2]	ž	006
	City Washington		State DC	Zip Code 20515-			Amou	int o	f Each	n Dis	sburs	emen	t this Period
	Purpose of Disbursement GIFT FOR CONSTITUENT		60.84 Refund or Disposal of Excess			ess							
	Candidate Name				Catego Type			C.F	bution: F.R. 40	0.5		ed Un	ider
	Office Sought: House Senate President	Disburse	ment For: Primary Other (spe	General cify) ▼			-		-	•	R C	SNC	TITUENT
	State: District:												
s	UBTOTAL of Disbursements This I	Page (optional) .											0.00

SCHEDULE B (FEC Form 3)	Use seperate schedule(s)	FOR LINE NUMBER: PAGE 81 / 88 (check only one)				
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 17				
		by any person for the purpose of solicating contributions committee to solicit contributions from such committee				
NAME OF COMMITTEE (In Full)						
Graves for Congress						
Full Name (Last, First, Middle Initial)		Transaction ID: 60802.E2216				
A. UMB Visa		Date of Disbursement				
Mailing Address 1010 Grand Blvd.		03				
City Kansas City	State Zip Code MO 64106-	Amount of Each Disbursement this Period				
Purpose of Disbursement		930.47				
CREDIT CARD: SEE BELOW Candidate Name		Category/ Type Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53				
Office Sought: House Disbu Senate President	rsement For: Primary General Other (specify)	CREDIT CARD: SEE BELOW				
State: District:	Other (specify)					
Full Name (Last, First, Middle Initial)		Transaction ID: 60802.E2221				
B. Dell Inc.	Dell Inc.					
Mailing Address One Dell Way	02 12 7 2006					
City	State Zip Code	Amount of Each Disbursement this Period				
Round Rock Purpose of Disbursement	TX 78682-	3348.91				
OFFICE COMPUTERS		Refund or Disposal of Excess				
Candidate Name	Category/ Type Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]					
Office Sought: House Disbu Senate President	rsement For: Primary General Other (specify)	MEMO: OFFICE COMPUTERS				
State: District:						
Full Name (Last, First, Middle Initial) C. FedEx Kinkos		Transaction ID: 60802.E2228 Date of Disbursement				
Mailing Address 7201 N Oak Traffic Wa	Mailing Address 7201 N Oak Traffic Way					
City Kansas City						
Purpose of Disbursement SPONORS BOARD FOR FUNDRAISING EVE	INT.	48.30				
Candidate Name		Category/ Category/ Type Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53				
Office Sought: House Disbu	rsement For: Primary General Other (specify)	[MEMO ITEM] MEMO: SPONORS BOARD FOR FUNDRAISING EVENT				
State: District:	Curer (specify) \					
SUBTOTAL of Disbursements This Page (optional		930.47				

SCHEDULE B (FEC Form 3)				INE NUMBER: PAGE 82 / 88					
ITEMIZED DISBURSEMENTS		Use seperate schedule(s) for each category of the	(check						
_		Detailed Summary Page		X 17 18 19a 19b 20a 20b 20c 21					
	y Information copied from such Reports and State for commercial purposes, other than using the nan								
Λ	NAME OF COMMITTEE (In Full)								
\angle	Graves for Congress								
Α.	Full Name (Last, First, Middle Initial) FedEx Kinkos			Transaction ID: 60802.E2222 Date of Disbursement					
	Mailing Address 7201 N Oak Traffic Way	<u> </u>		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$					
	City Kansas City	State Zip Code MO 64118-		Amount of Each Disbursement this Period					
	Purpose of Disbursement INVITES FOR FUNDRAISING EVENT			88.14 Refund or Disposal of Excess					
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53					
	Senate President	sement For: Primary General Other (specify) ▼		[MEMO ITEM] MEMO: INVITES FOR FUNDRAI- SING EVENT					
	State: District:								
В.	Full Name (Last, First, Middle Initial) Federal Express Shipping			Transaction ID: 60802.E2225 Date of Disbursement					
	Mailing Address PO Box 94515	02 16 7 2006							
	City Palatine	State Zip Code IL 60094-		Amount of Each Disbursement this Period					
	Purpose of Disbursement SHIPPING CHARGES		23.06 Refund or Disposal of Excess						
	Candidate Name		Category/ Type	11 C.F.R. 400.53					
	Office Sought: House Senate President	sement For: Primary General Other (specify) ▼		[MEMO ITEM] MEMO: SHIPPING CHARGES					
	State: District:								
C.	Full Name (Last, First, Middle Initial) Hy-Vee Foods			Transaction ID: 60802.E2223 Date of Disbursement					
	Mailing Address 1332 H 152 Highway	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$							
	City Liberty	State Zip Code MO 64068-		Amount of Each Disbursement this Period					
	Purpose of Disbursement CLEANING SUPPLIES	•	37.57 Refund or Disposal of Excess						
	Candidate Name	Contributions Required Under 11 C.F.R. 400.53							
	Office Sought: House Disburs Senate President	sement For: Primary General Other (specify) ▼		MEMO: CLEANING SUPPLIES					
	State: District:								
s	UBTOTAL of Disbursements This Page (optional))		0.00					

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SCHEDULE B (FEC Form 3)	Use seperate schedule(s)	-	E NUMBER: PAGE 83 / 88				
TEMIZED DISBURSEMENTS	for each category of the	(check onl	<u> </u>				
	Detailed Summary Page	H	X 17				
Any Information copied from such Reports and Sta	tements may not be sold or used	by any person i					
or for commercial purposes, other than using the n							
NAME OF COMMITTEE (In Full)							
Graves for Congress							
Full Name (Last, First, Middle Initial) A. Marriott Hotels			Transaction ID: 60802.E2220 Date of Disbursement				
Mailing Address 200 W. 12th Street			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 0 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{smallmatrix} \end{bmatrix}$				
City Kansas City	State Zip Code MO 64105-		Amount of Each Disbursement this Period				
Purpose of Disbursement		•	35.00				
HOTEL ROOM			Refund or Disposal of Excess Contributions Required Under				
Candidate Name		Category/ Type	11 C.F.R. 400.53				
Office Sought: House Disbu	rsement For:	. , po	[MEMO ITEM]				
Senate	Primary General		MEMO: HOTEL ROOM				
President	Other (specify)						
State: District:							
Full Name (Last, First, Middle Initial) Office Depot			Transaction ID: 60802.E2218 Date of Disbursement				
<u> </u>	_		M M / D D / Y Y Y				
Mailing Address 8501 North Evanston	Avenue		02 09 2006				
City Kansas City	State Zip Code MO 64157-		Amount of Each Disbursement this Period				
Purpose of Disbursement OFFICE SUPPLIES		•	28.10				
Candidate Name		Category/	Refund or Disposal of Excess Contributions Required Under				
		Type	11 C.F.R. 400.53 [MEMO ITEM]				
	rsement For:		MEMO: OFFICE SUPPLIES				
Senate President	Primary General Other (specify) ▼						
State: District:	Carior (openity)						
Full Name (Last, First, Middle Initial)			Transaction ID: 60802.E2230				
C. Office Depot			Date of Disbursement				
Mailing Address 8501 North Evanston	Avenue		$ \begin{bmatrix} M & M \\ 0 & 3 \end{bmatrix} \begin{bmatrix} D & D & D \\ 0 & 2 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y & Y & Y & Y & Y & Y & Y &$				
City	State Zip Code		Amount of Each Disbursement this Period				
Kansas City	MO 64157-		9.44				
Purpose of Disbursement OFFICE SUPPLIES		•	Refund or Disposal of Excess				
Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53				
Office Sought: House Disbu	rsement For:	. ,,,,	[MEMO ITEM]				
Senate	Primary General		MEMO: OFFICE SUPPLIES				
President Pictriot	Other (specify)						
State: District:							
SUBTOTAL of Disbursements This Page (options	al)		0.00				
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COUEDINE D /EEC Earm 2 \									
SCHEDULE B (FEC Form 3)	Use seperate schedule(s)	FOR LINE (check only	E NUMBER: PAGE 84 / 88 ly one)						
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		X 17						
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name									
NAME OF COMMITTEE (In Full)									
Graves for Congress									
Full Name (Last, First, Middle Initial) 4. Office Depot		Transaction ID: 60802.E2226 Date of Disbursement							
Mailing Address 8501 North Evanston Av	enue		$\begin{bmatrix} \begin{smallmatrix} M & Z & M \\ O & Z & M \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & Z \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & O & O & G \\ Y & Z & O & O & G \end{bmatrix} $						
City Kansas City	State Zip Code MO 64157-		Amount of Each Disbursement this Period						
Purpose of Disbursement FUNDRAISING SUPPLIES			4.72 Refund or Disposal of Excess						
Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53						
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)		[MEMO ITEM] MEMO: FUNDRAISING SUPPLIES						
Full Name (Last, First, Middle Initial)			Transaction ID: 60802.E2224						
3. The Homestead			Date of Disbursement						
Mailing Address PO Box 2000			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & Z \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ I & G \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & \check{Y} & \check{O} & \check{O} & G \\ & \check{Z} & O & O & G \end{bmatrix}$						
City Hot Springs	State Zip Code VA 24445-		Amount of Each Disbursement this Period						
Purpose of Disbursement ROOM FOR FUNDRAISING EVENT			2000.00 Refund or Disposal of Excess						
Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]						
Senate President	ement For: Primary General Other (specify)		MEMO: ROOM FOR FUNDRAISING EVENT						
State: District:									
Full Name (Last, First, Middle Initial) USPS-Liberty			Transaction ID: 60802.E2217 Date of Disbursement						
Mailing Address 1000 Progress Dr			$\begin{bmatrix} \begin{smallmatrix} M & Z & M \\ O & Z \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ O & D \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & O & O & G \\ Y & Z & O & O & G \end{bmatrix}$						
•	State Zip Code MO 64068-		Amount of Each Disbursement this Period						
Purpose of Disbursement POSTAGE			40.13 Refund or Disposal of Excess						
Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]						
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)		MEMO: POSTAGE						
State: District:	- ·								
SUBTOTAL of Disbursements This Page (optional)		>	0.00						

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City

В.

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

FOR LINE NUMBER: PAGE 85/88 Use seperate schedule(s) (check only one) for each category of the Detailed Summary Page 17 18 19b 20a 20b 20c Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicating contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) **Graves for Congress** Full Name (Last, First, Middle Initial) Transaction ID: 60802.E2219 A. USPS-NKC Date of Disbursement 10 0 2 2006 Mailing Address 820 Armour Rd State Zip Code Amount of Each Disbursement this Period Kansas City 64116-MO

Purpose of Disbursement POSTAGE Candidate Name Category/ Type Office Sought: Disbursement For: Senate Primary General	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: POSTAGE	
Candidate Name Category/ Type Office Sought: Disbursement For: Senate Primary General	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]	
Senate Primary General		
☐ President ☐ Other (specify) ▼ State: District:	MEMO: POSTAGE	
Full Name (Last, First, Middle Initial) Keelen Communications	Transaction ID: 60802.E2325 Date of Disbursement	
Mailing Address P.O. Box 2776	$\begin{bmatrix} 0 & 2 & M \\ 0 & 2 & M \end{bmatrix} / \begin{bmatrix} 0 & 0 & 0 \\ 0 & 0 & 6 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & 0 & Y \\ 2 & 0 & 0 & 6 \end{bmatrix}$	
City State Zip Code Arlington VA 22202-	Amount of Each Disbursement this Period	
Purpose of Disbursement CONSULTING	7200.00 Refund or Disposal of Excess	
Candidate Name Category/ Type	Contributions Required Under 11 C.F.R. 400.53	
Office Sought: House	CONSULTING	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	<u> </u>	7200.00
TOTAL This Period (last page this line number only)	•	117895.11

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SCHEDULE B (FEC Form 3)

FOR LINE NUMBER: PAGE 86 / 88 Use seperate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the Detailed Summary Page 18 19b 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicating contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) **Graves for Congress** Full Name (Last, First, Middle Initial) Transaction ID: 60802.E2329 Tom Osborne for Governor Date of Disbursement 2 1 0 2 2006 Mailing Address 525 South 13th St City State Zip Code Amount of Each Disbursement this Period Lincoln NE 68503-1000.00 Purpose of Disbursement **CAMPAIGN CONTRIBUTION** Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: Disbursement For: 2006 House Senate X Primary General President Other (specify) State: District:

		1000.00
SUBTOTAL of Disbursements This Page (optional)	>	1000.00
TOTAL This Period (last page this line number only)	•	1000.00

SCHEDULE D (FEC Form 3) D E

(Use separate

PAGE 87 / 88

		for each	(check only one) 9
xcluding Loans		numbered line)	X 10
IAME OF COMMITTEE (In Full)			
Graves for Congress			
A. Full Name (Last, First, Middle Initial) of Debtor of Boyles Motors, Inc.	Creditor	Nature of D Vehicle Le	ebt (Purpose):
Mailing Address 204 N. Market Street			
City State	ZIP Code		
Maryville MO	64468-		
Outstanding Balance Beginning This Period		Tra	nsaction ID: 3LS60802.E42
500.00			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	0.00		500.00
B. Full Name (Last, First, Middle Initial) of Debtor of Kwrt-am/kwrt-fm	Creditor	Nature of D Radio Adv	ebt (Purpose): vertising
Mailing Address 1600 Radio Hill Road			
City State Boonville MO	ZIP Code 65233-		
Outstanding Balance Beginning This Period	00200-	T	
		ıra	nsaction ID: 2LS60802.E45
857.65	Daymant This Davis	O. statas a ali	on Bolomoo et Class of This Boried
Amount Incurred This Period	Payment This Period	Outstandii	ng Balance at Close of This Period
0.00	0.00		857.65
C. Full Name (Last, First, Middle Initial) of Debtor of	Creditor	Nature of D	ebt (Purpose): Iodaway Co. Repu- m
Willard Dowden	Willard Dowden		
Mailing Address Route 1, Box 116			
City State	ZIP Code		
Burlington Junctio MO	64428-		
Outstanding Balance Beginning This Period		Tra	nsaction ID: 4LS60802.E46
200.00			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	0.00		200.00
SUBTOTALS This Period This Page (optional)		•	1557.65
TOTALS This Period (last page this line number on	ly)	>	
TOTALS OUTSTANDING LOANS from Schedule	C (last page only)	>	
ADD 2) and 3) and carry forward to appropriate line	e of Summary Page (last page only)	- b	

PAGE 88 / 88 SCHEDULE D (FEC Form 3) (Use separate FOR LINE NUMBER: schedule(s) **DEBTS AND OBLIGATIONS** for each numbered line) (check only one) 9 X 10 **Excluding Loans** NAME OF COMMITTEE (In Full) **Graves for Congress** A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Missouri Right to Life PAC Membership Labels Mailing Address P.O. Box 651 ZIP Code City State Jefferson City MO 65102-Outstanding Balance Beginning This Period Transaction ID: LS60802.E49 1087.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 1087.00 0.00 1087.00 1) SUBTOTALS This Period This Page (optional)..... 2644.65 2) TOTALS This Period (last page this line number only).....

3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)